

North Dakota State Online Ambulance Reporting

Data Dictionary

Prepared by:



North Dakota State Online Ambulance Reporting Table of Content

Data Dictionary Panel	4
Lithocode	5
Agency / Unit Number.....	6
Primary Role of Unit.....	7
Incident Number (PCR \ Response \ Trip Number)	9
Date Incident Reported.....	10
PCR Report Date.....	11
Estimated Date of Injury or Onset of Symptom	12
Estimated Time of Injury or Onset of Symptom.....	13
Incident GPS Location.....	14
Incident City / County FIPS.....	15
Dispatch Type.....	16
Incident Type (Service Type)	18
Injury Present.....	20
Location Type	21
Incident / Patient Disposition	25
Primary Crewmember Certification Type.....	27
Primary Crewmember Certification Number.....	29
Crewmember Two Certification Type	30
Crewmember Two Certification Number	31
Crewmember Three Certification Type.....	32
Crewmember Three Certification Number.....	33
Crewmember Four Certification Type.....	34
Crewmember Four Certification Number.....	35
PSAP Time of Call (Time Incident Reported).....	36
Dispatched (Time Unit Notified).....	37
Enroute (Time Unit Responded).....	38
Arrive Scene (Time arrived at Scene)	39
Arrived Patient (Time of arrival at Patient).....	40
Departed Scene (Time Unit left Scene).....	41
Arrive Destination (Time Arrival at Facility / Destination).....	42
Available (Time back in service).....	43
Patient's First Name	44
Patient's Last Name	45
Patient Street Address.....	46
City of Residence.....	47
State of Residence	48
Zip Code of Residence	49
Social Security Number	50
Date of Birth.....	51
Age	52
Gender.....	53
Race / Ethnicity.....	54
Vehicle Type	55
Response Mode (Lights and Sirens to Scene)	56
Transport Mode (Lights and Sirens used from Scene).....	57
Cause of Injury / Mechanism of Injury.....	58
Pertinent Pre-existing Conditions	63
Complaint Reported by Dispatch.....	65
Signs and Symptoms Present	67

Provider Impression.....	69
Scene Factors Affecting EMS Delivery of Care	71
Injury Description	72
Safety Devices	74
Motor Vehicle Impact.....	75
Witnessed Cardiac Arrest.....	76
Time of Cardiac Arrest.....	77
Provider of First CPR.....	78
Time of First CPR	79
Provider of First Defibrillation.....	80
Time of First Defibrillatory Shock.....	81
Number of Defibrillatory Shocks	82
Time CPR Discontinued	83
Time of Spontaneous Circulation Returned.....	84
Injury Indicators	85
Position in Vehicle	86
Alcohol / Drug Use.....	87
Initial Vital Signs Time	88
Initial Pulse Rate.....	89
Initial Respiratory Rate	90
Initial Systolic Blood Pressure	91
Initial Diastolic Blood Pressure	92
Initial Blood Pressure Method.....	93
Initial Skin Perfusion	94
Initial Glasgow Eye Opening Component	95
Initial Glasgow Verbal Component	96
Initial Glasgow Motor Component.....	98
Initial Revised Trauma Score	100
Initial Cardiac Rhythm Time	102
Initial Cardiac Rhythm.....	103
Final Cardiac Rhythm Time	105
Final Cardiac Rhythm	106
Procedure or Treatment Name.....	107
Level of Care Provided (Nature of Incident)	109
Medication Name.....	110
Destination Type.....	112
Destination Determination	113
Prior Aid.....	114
Receiving Agency	116
Research 1	117
Research 2	118
Dataset Version	119
Appendix A (EMS Agency List).....	120
Appendix B (Receiving Health Facility List)	123
Appendix C (North Dakota City / County FIPS)	126
Appendix D (Medication List).....	163
Appendix E (Flat ASCII File Format)	165

North Dakota State Online Ambulance Reporting

Each data element is presented using the following template. The Consensus Panel considered it important to provide sufficient detail about each data element to justify its inclusion in the uniform data set, as well as to assist agencies, which seek to implement a data collection system. When a data element requires specific categories, these are listed in the data item specification ("Data Items"). The Panel recognizes that the lists, which are included in this dictionary are imperfect, but definitions of these lists have been debated for many years without resolution.

Definition of the Priority items:

Mandatory: These are elements that are required on all incidents. Failure to provide the mandatory element will flag the record of the incident to NOT be accepted into the registry. Correction of the deficiency is required to properly submit the incident.

Essential: These are elements that are to be completed on incidents where they pertain as identified in the Business Rules section for the particular element. If they are missing, the record will be accepted by the registry, but will be flagged as non-compliant.

Desirable: These are elements that are strongly requested but may not be possible to collect on all incidents.

#

Name of Data Element:	Name
Priority:	Mandatory or Essential or Desirable
Definition:	Short definition of data element
Code:	A coded description of the data element values or attributes
Field Length:	Length of data element
Field Starting and Ending Position:	Specifies position of data element in ASCII fixed length file
Data Items:	Defined data elements - alternative descriptions of the data element values or attributes.

Content: Detailed discussion of definition and content.

Discussion and Justification: Provide further details and justify the data element.

Business Rules: Provide information on the requirements for and to a data element to enforce data integrity and submission compliance.

Technical Comments: Additional information which may be of use to individuals setting up a data collection system.

North Dakota State Online Ambulance Reporting Element Dictionary

1.

Name of Data Element:	Lithocode
Priority:	Mandatory
Definition:	Unique number for each incident in a state
Code:	Numeric entry
Field Length:	8
Field Starting and Ending Position:	1 - 8

Content: Unique 8 digit number from series assigned to an approved software product from commercial vendor or in-house from EMS agency.

Discussion and Justification: Unique numbers for a patient care record. This number is unique within the state and region. Provides a specific key to a specific record. This record number will fulfill all the requirements for linkage, which have been described under incident number.

Business Rules: *All records submitted must have a unique lithocode in the series assigned to the software company.* Records with duplicate or missing lithocodes will be rejected and marked as non-compliant by the system.

Technical Comments: This is the central and most important number in the prehospital portion of the EMS information system. Every incident must have a Lithocode number even if there is no patient. An incident will have multiple Lithocodes if there are multiple patients or multiple responders to single patients.

2.

Name of Data Element:	Agency / Unit Number
Priority:	Mandatory
Definition:	Number that identifies the agency and unit responding to an incident.
Code:	Numeric entry.
Field Length:	8
Field Starting and Ending Position:	9 - 16
Data Items: Refer to Appendix A (EMS Agency List) for Agency Number	

Content: This element consists of a State assigned agency number with a left justified zero (0) and the State Radio assigned unit number.

Discussion and Justification: Identifies specific agency and unit number. Can be used to construct reports, which are specific to agencies or units. Particularly valuable for local reporting. This number may also be of value in the automatic construction of PCR numbers or incident numbers.

Business Rules: *All records submitted must have an Agency/Unit Number entered.* The Agency number must be from the approved agency list as published by the North Dakota Department of Health, Division of EMS. Records with a missing or an invalid entry will be rejected and marked as non-compliant by the system.

Technical Comments: This is a combination of the agency's number assigned by the North Dakota Department of Health, Division of EMS along with the State Radio. The first 4 numbers are the agency number as assigned by the North Dakota Department of Health, Division of EMS with a left justified zero to increase the size to 4 (Fordville Ambulance Service = 0039). The last 4 digits, Unit Number, are defined by State Radio to identify individual vehicles in the fleet. The Unit Number should stay permanently assigned to the vehicle until retirement of that vehicle. This allows the generation of reports for a specific vehicle in a fleet.

3.

Name of Data Element:	Primary Role of Unit
Priority:	Mandatory
Definition:	Primary role of the vehicle use during the incident.
Code:	Numeric entry
Field Length:	2
Field Starting and Ending Position:	17 - 18
Data Items: <div style="display: flex; justify-content: flex-end; padding-right: 20px;"> <div style="display: flex; flex-direction: column; align-items: flex-end; margin-bottom: 5px;"> 01 02 03 04 </div> <div style="display: flex; flex-direction: column; align-items: flex-end;"> Transport Non-Transport Rescue Supervisor </div> </div>	

Content: This is a list of the general categories that should match the primary role of this vehicle during this incident.

Discussion and Justification: The primary role of the EMS service, which was requested for this specific EMS incident. Assists in differentiating the roles of several vehicles that respond to the same incident.

Business Rules: *All records submitted must have a Primary Role entered.* Records with missing or an invalid Primary Role will be rejected and marked as non-compliant by the system. **Only one (1) Primary Role** from the above data item list can be submitted.

Technical Comments: Allows EMS data at the national level to be sorted by the Role of the responder. Provides descriptive data on EMS call volume and service provided.

01 *Transport*

Refers to direct response to the scene and the role of the unit was for transporting the patient. Does not matter if the incident disposition or outcome did not involve a transport, just that the unit's role was to transport a patient.

02 *Non-Transport*

Refers to direct response to the scene or rendezvous where primary care is taken over, but transport is by another EMS entity. Does not matter what the incident disposition or outcome was.

03 *Rescue*

Refers to direct response to the scene and the unit's primary role was to assist with extrication or specialty rescue at the incident.

04 *Supervisor/Assist unit*

Refers to direct response to the scene by the unit as a supervisor or provide other assistance, but did not assume primary care.

4.

Name of Data Element:	Incident Number (PCR\Response\Trip Number)
Priority:	Mandatory
Definition:	Unique number for each incident reported to dispatch.
Code:	Alpha/numeric entry.
Field Length:	7
Field Starting and Ending Position:	19 - 25

Content: This element consists of the unique 7-position number assigned by a local jurisdiction to each EMS related incident. Zero fill, left justified if number is small (e.g. 0000123).

Discussion and Justification: It should be unique within an agency, and then by combining it with a unique agency number, it will be possible to construct another unique identifying number for the incident.

This number is valuable for linking EMS data files with other files related to the incident, such as emergency department and inpatient hospital files, if those medical files also contain this number. Accurate numbering within all available files may be facilitated by technologies such as bar codes.

Probabilistic linkage methodology is of great value when linking files that do not have numeric fields such as incident number in common. However, linkage is greatly facilitated by the presence of such a number in each of the files to be linked.

Business Rules: *All records submitted must have an agency defined Incident Number for local cross-reference.* Records with a missing or an invalid entry will be rejected and marked as non-compliant by the system. Duplicates of this field are ignored.

Technical Comments: In some cases incident number, Lithocode number, or PSAP number may be the same.

5.

Name of Data Element:	Date Incident Reported
Priority:	Mandatory
Definition:	Date the call is first received by a public safety answering point (PSAP) or other designated entity.
Code:	Date format should be coded as MMDDYYYY.
Field Length:	8
Field Starting and Ending Position:	26 - 33

Content: Format permits sorting across multiple years, and is recommended for data export purposes. Century digits are mandatory.

Discussion and Justification: Used in conjunction with "Time Incident Reported" to assess the duration between onset of a medical emergency and receipt of a request for EMS response, as well as to assess the duration of time required mobilizing the response and providing the patient definitive care. The data element is also used to help EMS planners allocate resources by day of week and season of year.

Business Rules: *All records submitted **must** have a Date Incident Reported entered.* Records with missing or an invalid entry will be rejected and marked as non-compliant by the system.

Technical Comments: Format MMDDYYYY is recommended as part of FIPS standard. For month and day, use leading zeros if necessary to pad the fields to 2 characters each.

6.

Name of Data Element:	PCR Report Date
Priority:	Mandatory
Definition:	Date the PCR was entered.
Code:	Date format should be coded as MMDDYYYY.
Field Length:	8
Field Starting and Ending Position:	34 - 41

Content: Format permits sorting across multiple years, and is recommended for data export purposes. Century digits are mandatory.

Discussion and Justification: Used in conjunction with "Time Incident Reported" to assess the duration between onset of a medical emergency and receipt of the PCR report submission. The data element is also used to help EMS planners allocate resources by day of week and season of year.

Business Rules: *All records submitted must have a PCR Report Date entered.* Records with missing or an invalid entry will be rejected and marked as non-compliant by the system.

Technical Comments: Format MMDDYYYY is recommended as part of FIPS standard. For month and day, use leading zeros if necessary to pad the fields to 2 characters each.

7.

Name of Data Element:	Estimated Date of Injury or Onset of Symptoms
Priority:	Desired
Definition:	Estimated date of injury or onset of medical symptoms either by EMS personnel or reported to EMS personnel by patient or bystander.
Code:	Day format should be coded as MMDDYYYY.
Field Length:	8
Field Starting and Ending Position:	42 - 49

Content: MM ranges from 01 to 12; DD ranges from 01 to 31; YYYY ranges from 1932 - present.

Discussion and Justification: Necessary to measure impact of injury time on treatment provided by EMS staff as well as receiving trauma care facility.

Business Rules: *Records submitted with an Incident Disposition code of 'Treated, Transported...', 'Care Transferred', 'Patient Refused', 'Treated, transported... vehicle', 'Treated and...', 'DOA', 'may have an Estimated Date of Injury or Onset of Symptoms entered. Required records with a missing or an invalid entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.*

Technical Comments: Format MMDDYYYY is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two-(2) character field width for MM and DD.

8.

Name of Data Element:	Estimated Time of Injury or Onset of Symptoms
Priority:	Desired
Definition:	Estimated time of injury or onset of medical symptoms either by EMS personnel or reported to EMS personnel by patient or bystander.
Code:	Time format should be coded as HHMM.
Field Length:	4
Field Starting and Ending Position:	50 - 53

Content: HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: Necessary to measure impact of injury time on treatment provided by EMS staff as well as receiving trauma care facility.

Business Rules: *Records submitted with an Incident Disposition code of 'Treated, Transported...', 'Care Transferred', 'Patient Refused', 'Treated, transported... vehicle', 'Treated and...', 'DOA', 'may have an Estimated Time of Injury or Onset of Symptoms entered. Required records with a missing or an invalid entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.*

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two-(2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

9.

Name of Data Element:	Incident GPS Location
Priority:	Desirable
Definition:	The Incident's GPS coordinates where the patient was found, or, if no patient, address to which unit responded.
Code:	Alpha/numeric entry
Field Length:	20
Field Starting and Ending Position:	54 - 73

Content: Contains the GPS coordinates, Latitude and Longitude, of the incident where the patient was found or location unit responded to.

Discussion and Justification: Provides exact location of incident, which can be used to determine the appropriate level of EMS resources for specific areas.

Business Rules: If the data is not submitted then the field must be left blank and filled with the appropriate spaces.

Technical Comments: The format should be Latitude followed by Longitude. Use only the N (North) and W (West) identifiers with numbers in order of degree, minutes and decimal. Do not submit decimal or minute marks (N512345W0772345).

10.

Name of Data Element:	Incident City/County FIPS
Priority:	Mandatory
Definition:	City or township (if applicable) where patient was found or to which unit responded (or best approximation)
Code:	Numeric entry.
Field Length:	5
Field Starting and Ending Position:	74 - 78
Data Items: Please refer to Appendix C (North Dakota City/County FIPS List) 99999 – Not Listed	

Content: This five (5)-digit field is coded using the FIPS system, wherein each city is encoded as a five (5)-digit number (i.e. Bismarck '07200'.) City FIPS codes are only unique within a state.

Business Rules: *All records submitted must have an Incident FIPS entered.* The FIPS entered must be from the approved FIPS list found in Appendix C. Records with a missing or an invalid entry will be rejected and marked as non-compliant by the system.

Discussion and Justification: Provides city location of incident, which can be used to determine the appropriate level of EMS resources for specific areas. In addition, this field may facilitate probabilistic linkage to crash reports from the same city, or to hospitals within the same city. Field may be used for local city reports, permitting local understanding of the impact of EMS.

11.

Name of Data Element:	Dispatch Type
Priority:	Mandatory
Definition:	Type of service requested.
Code:	Numeric entry
Field Length:	2
Field Starting and Ending Position:	79 - 80
Data Items: <div style="display: flex; justify-content: space-between; padding: 0 40px;"> <div>01</div> <div>911 Response</div> </div> <div style="display: flex; justify-content: space-between; padding: 0 40px;"> <div>02</div> <div>Intercept/EMS Rendezvous</div> </div> <div style="display: flex; justify-content: space-between; padding: 0 40px;"> <div>03</div> <div>Support Services</div> </div> <div style="display: flex; justify-content: space-between; padding: 0 40px;"> <div>04</div> <div>Scheduled Transfer</div> </div> <div style="display: flex; justify-content: space-between; padding: 0 40px;"> <div>05</div> <div>Unscheduled Transfer</div> </div>	

Content: This is the type of service or category of service requested of the EMS agency responding for this specific EMS incident.

Discussion and Justification: Used to categorize the types of service, which are required, and allows planning of EMS resource allocation.

Business Rules: *All records submitted must have a Dispatch Type entered.* Records with missing or an invalid Dispatch Type will be rejected and marked as non-compliant by the system. **Only one (1) Dispatch Type** from the above data item list can be submitted.

Technical Comments: Dispatch type is important for epidemiologists as well as EMS planners deciding where to allocate EMS resources. Provides descriptive data on EMS call volume and service provided.

01 911 Response

The incident request either originated from a Public Safety Answering Point (PSAP) or a “silent alarm” but would be considered a 911 response (public notifies in station crew of MVA in front of station).

02 Intercept / EMS Rendezvous

The incident request at time of dispatch was to provide a support service to another agency and if the patient condition warranted to assist in the transport of the patient. This would be utilized for 911 Responses as well as non-911 request for a similar service. Examples of this would be an ALS chase vehicle that is simultaneously dispatched or requested later to meet up either at the scene or enroute with a BLS unit.

03 *Support Services*

The incident request is for a non-emergent response or for a response not covered in other descriptions. The origin of the dispatch does not dictate type, so PSAP dispatch for a non-emergent sporting standby would be a Support Services type. Other examples would be for a standby at a sporting event, community service for disabled individuals, and so on.

04 *Scheduled Transfer*

The incident request is a scheduled transfer of a patient from one facility to another facility. However, this code is chosen when the transfer is scheduled in advance. Examples include; a planned morning transfer of a patient from one hospital to another or non-ambulatory transport of a patient from home to physician's office.

05 *Unscheduled Transfer*

The incident request is an unscheduled transfer of a patient from one facility to another facility unexpectedly or emergently. This code should not be used for planned or listed transfers, which are coded separately. The second unit involved in the transfer of a patient from one EMS responder to another responder during an unscheduled transfer, which is also coded as an Intercept/EMS Rendezvous, should not use this code.

12.

Name of Data Element:	Incident Type (Service Type)
Priority:	Mandatory
Definition:	Type of service requested.
Code:	Numeric entry
Field Length:	2
Field Starting and Ending Position:	81 - 82
Data Items: <div style="display: flex; justify-content: flex-end; padding-right: 20px;"> <div style="text-align: right; padding-right: 10px;">01</div> <div>Fire</div> </div> <div style="display: flex; justify-content: flex-end; padding-right: 20px;"> <div style="text-align: right; padding-right: 10px;">02</div> <div>Medical</div> </div> <div style="display: flex; justify-content: flex-end; padding-right: 20px;"> <div style="text-align: right; padding-right: 10px;">03</div> <div>Trauma</div> </div> <div style="display: flex; justify-content: flex-end; padding-right: 20px;"> <div style="text-align: right; padding-right: 10px;">04</div> <div>Hazmat</div> </div> <div style="display: flex; justify-content: flex-end; padding-right: 20px;"> <div style="text-align: right; padding-right: 10px;">05</div> <div>Public Service</div> </div> <div style="display: flex; justify-content: flex-end; padding-right: 20px;"> <div style="text-align: right; padding-right: 10px;">06</div> <div>Standby</div> </div> <div style="display: flex; justify-content: flex-end; padding-right: 20px;"> <div style="text-align: right; padding-right: 10px;">07</div> <div>Interfacility</div> </div> <div style="display: flex; justify-content: flex-end; padding-right: 20px;"> <div style="text-align: right; padding-right: 10px;">08</div> <div>Patient Transfer</div> </div>	

Content: This is a list of the general categories that should match the type of the incident.

Discussion and Justification: Used to categorize the types of service, which are required, and allows planning of EMS resource allocation.

Business Rules: *All records submitted must have an Incident Type entered.* Records with missing or an invalid Incident Type will be rejected and marked as non-compliant by the system.

Only one (1) Incident Type from the above data item list can be submitted. If responders do not arrive on scene they are to approximate the incident type based on dispatch information.

Technical Comments: Incident type is important for epidemiologists as well as EMS planners deciding where to allocate EMS resources.

01 *Fire*

Refers to direct response to the scene of a Fire Incident. This location should be the location indicated in data element 9 in this document.

02 *Medical*

Refers to direct response to the scene of a Medical Incident. This location should be the location indicated in data element 9 in this document.

03 *Trauma*

Refers to direct response to the scene of a Trauma Incident.

04 *Hazmat*

Refers to direct response to the scene of a Hazmat Incident.

05 *Public Service*

Refers to a situation in which EMS response unit is performing a public service.

06 *Standby*

Refers to situation in which EMS response unit is requested to arrive at a scene and be available, such as at a football stadium. If an incident occurs during the *standby*, the service requested becomes *scene*.

07 *Interfacility*

Refers to the transfer of patients from one acute care facility to another acute care or tertiary facility (i.e. local hospital to trauma center).

08 *Patient Transfer*

Refers to the non-emergent transport of a patient from any location to any other location (i.e. home to dialysis center or hospital to home or hospital to rehabilitation center). The origin or destination may be an acute care facility.

13.

Name of Data Element:	Injury Present
Priority:	Essential
Definition:	Indicates whether or not there was an injury
Code:	Numeric entry
Field Length:	2
Field Starting and Ending Position:	83 - 84
Data Items: <div style="display: flex; justify-content: flex-end; align-items: center; padding-right: 20px;"> <div style="text-align: right; padding-right: 10px;">00</div> <div>No</div> </div> <div style="display: flex; justify-content: flex-end; align-items: center; padding-right: 20px;"> <div style="text-align: right; padding-right: 10px;">01</div> <div>Yes</div> </div> <div style="display: flex; justify-content: flex-end; align-items: center; padding-right: 20px;"> <div style="text-align: right; padding-right: 10px;">88</div> <div>Not Applicable</div> </div>	

Content: Coded as a two (2)-digit field.

Discussion and Justification: Indicates whether or not the patient sustained injury in association with the incident type. The use of this data element will allow injuries to be tracked for non-traumatic incident categories (syncopal episode with injuries from the fall) as well as traditional traumatic incidents (Motor vehicle accident, shootings, etc.). Allows EMS data at the national level to be sorted based on traumatic vs. non-traumatic despite the incident type or primary impression.

Business Rules: *All records submitted must have an Injury Present entered.* Records with missing or an invalid Injury Present will be rejected and marked as non-compliant by the system. **Only one (1) Injury Present** from the above data item list can be submitted. If the incident is appropriate to not report this data element, then this field must be submitted with the Not Applicable code.

Technical Comments: This element in association with the Incident Type data element will assist epidemiologists as well as EMS planners in better sorting data based on trauma vs. non-traumatic events.

88 *Not Applicable*

This is coded when an incident's disposition did not involve a patient contact.

14.

Name of Data Element:	Location Type		
Priority:	Mandatory		
Definition:	Type of location of incident		
Code:	Numeric entry		
Field Length:	2		
Field Starting and Ending Position:	85 - 86		
Data Items			
01	Residence	14	Mine
02	Traffic way 55+mph	15	Office/Business
03	Other Traffic way	16	Hospital/Acute Care Facility
04	Public Place	17	Clinic /Dr. Office
05	Recreation area	18	Extended Care Facility
06	Waterway	19	Off Road
07	Wilderness	20	Correctional Facility
08	Hotel / Motel	21	Mental Health Facility
09	School / College	22	Specialty Care Facility
10	Bar / Restaurant	77	Unspecified location
11	Farm / Ranch	88	Not Applicable
12	Reservation	99	Unknown
13	Industrial		

Content: Location type data items are coded in terms of the (ICD-9) E849 place of occurrence codes. This location refers to the location where the injury occurred, not necessarily the origin of the transport.

Discussion and Justification: Location type of the incident is important for epidemiologists as well as EMS planners deciding where to allocate EMS resources.

The categories in this dictionary are from ICD-9 and are E849 place of occurrence codes, with exceptions. These exceptions allow for more defined coding of established E849 codes or for unique locations inherent to North Dakota that are not addressed in E849 but important for state planning.

Business Rules: *All records submitted must have an Incident Location Type entered.* Records with missing or an invalid entry will be rejected and marked as non-compliant by the system.

Only one (1) Incident Location Type from the above data item list can be submitted.

If responders do not arrive on scene they are to approximate the incident location based on dispatch information.

Technical Comments: It is expected that these codes will need to be modified when ICD-10 becomes widely used. Definitions below are from ICD-9, which is currently utilized.

01 *Residence (E Code 849.0)*

Includes apartment, boarding house, farm house, home premises, residential house, non-institutional place of residence, private driveway, private garage, private garden, private home, private walkway, swimming pool within private house or garden, and yard of home. Excludes home under construction but not occupied, or institutional place of residence.

02 *Traffic way 55 + mph*

Includes all public roadways where speed limit is rated as 55 miles per hour or higher.

03 *Other Traffic way*

Includes all public roadways where speed limit is rated lower than 55 miles per hour.

04 *Public Place*

Includes any place used by the general public, including airport, bank, cafe, church, cinema, clubhouse, courthouse, dance hall, parking garage, market, movie theater, music hall, opera house, post office, public hall, broadcasting station, bus or railway station, State and Federal buildings or theater. Excludes home garage or industrial building or workplace. Excludes occurrences in private house, private garden, private swimming pool, and private yard.

05 *Recreation area (E Code 849.4)*

Includes amusement park, baseball field, basketball court, beach resort, cricket ground, football field, golf course, gymnasium, hockey field, holiday camps, ice palace, lake resort, mountain resort, playgrounds including school playground, public parks, racecourses, resorts of all types, riding school, rifle range, seashore resorts, skating rink, sports ground, sports palace, stadium, public swimming pool, tennis court, vacation resort. Excludes occurrences in private house, private garden, private swimming pool, and private yard.

06 *Waterway*

Includes any stream, creek, reservoir, river, pond, natural pond, swamp, lake, sea or oceans. Excludes occurrences in private house, private garden, private swimming pool, and private yard.

07 *Wilderness*

Includes any wilderness area used by the general public that is not publicly owned.

08 *Hotel / Motel*

Includes any building that is considered to be a Hotel or Motel used by the general public.

09 *School / College*

Includes state, public and private schools. Excludes playground, gymnasium, and other recreational locations within educational institutions, which should be coded as place for recreation or sport.

10 *Bar /Restaurant*

Includes any building that is considered to be a Bar or Restaurant used by the general public.

11 *Farm/Ranch*

Includes any buildings or land that are designated as a Farm or a Ranch

12 *Reservation*

Includes any buildings or land that are designated as a Reservation.

13 *Industrial* (E Code 849.3)

Includes building under construction, dockyard, dry dock, factory building or premises, garage (place of work), industrial yard, loading platform in factory or store, industrial plant, railway yard, shop (place of work), warehouse, and workhouse.

14 *Mine* (E Code 849.2)

Includes gravel pit, sand pit, or tunnel under construction.

15 *Office/Business*

Includes locations that are designated as a place of employment.

16 *Hospital/Acute Care Facility*

Includes locations that are designated by the State Department of Health to be providing acute care for patients.

17 *Clinic / Dr. Office*

Includes locations that are designated as Clinic or private Dr. Offices.

18 *Extended Care Facility*

Includes locations that are designated by the State Department of Health to be providing extended care for patients.

19 *Off Road*

Includes all Non Public Roadways or any Off Roadways.

20 *Correctional Facility*

Includes any building used to house or hold prisoners.

21 *Mental Health Facility*

Includes any building used for mental health care or treatments.

22 *Specialty Care Center*

Includes all surgi-centers, dialysis or other specialty health care stand-alone facilities.

77 *Unspecified location* (E Code 849.9)
Includes any location not included in the above classification.

88 *Not Applicable*
To be used when there is no patient.

99 *Unknown* (E Code 849.U))
To be used when the location of incident is not known.

15.

Name of Data Element:	Incident / Patient Disposition		
Priority:	Mandatory		
Definition:	End result of EMS response.		
Code:	Numeric entry		
Field Length:	2		
Field Starting and Ending Position:	87 - 88		
Data Items:			
01	Treated, transported by EMS	06	Treated and Released
02	Care transferred	07	No treatment required
03	Cancelled	08	Dead at scene
04	Patient refused care, AMA	09	No Patient Found
05	Treated, transported by private vehicle		

Content: This two (2)-digit data element reflects the final disposition of EMS responses.

Discussion and Justification: Allows reports to be generated according to the final disposition of EMS responses. This will provide information about the reasons for which EMS is notified, correlated with the ultimate incident disposition. For instance, it will be of value to know that in certain regions, EMS is frequently activated to see patients who require no treatment or transport. Reports generated from this data element may be of use in coordinating the dispatch and responder functions as well.

Business Rules: *All records submitted must have an Incident/Patient Disposition entered.* Records with missing or an invalid entry will be rejected and marked as non-compliant by the system. **Only one (1) Incident/Patient Disposition** from the above data item list can be submitted. This field is important in that it dictates further required fields based on the selections. For example a 'Treated, Transported ...' disposition will require more completed fields submitted than a disposition of 'Cancelled'.

Technical Comments:

01 Treated and transported by EMS

This code means that the EMS responder providing the data record treated and transported the patient. Transport may be to any valid destination, as defined for the destination data element. If the EMS responder transports a patient to a rendezvous point with another EMS responder (for instance, a ground crew rendezvous with a helicopter based agency), this is the correct code for this data element.

02 *Care transferred*

This code means that the EMS responder provided treatment at the scene but the patient was transferred into the care of another service. The EMS responder did not provide transport in this instance. For example, if a BLS provider is at a scene and treats a patient, but a separate ALS responder arrives and takes over, the BLS record would indicate this code. If an EMS responder treats a patient who is then transported by a separate police or fire vehicle, this is the correct code for the EMS responder record.

03 *Cancelled*

This code means that the EMS response was cancelled enroute or on scene and no patient contact occurred.

04 *Patient refused care, Against Medical Advice (AMA)*

Patient was at scene and refused care, whether injured or not. If the EMS responder knows that there is an injury, but the patient refuses care and is transported by friends or acquaintances, this is still the correct code for this data element.

05 *Treated, transported by private vehicle*

This code means that the EMS responder provided treatment, but the patient was transported to his or her destination by a private vehicle. This includes instances in which the patient transports himself via private automobile, if the EMS responder understands that the patient is going to seek further medical care, such as at a private doctor's office or the local emergency department.

06 *Treated and released*

This code means that the EMS responder provided treatment, and the patient required no further emergency care. This is distinct from the instance in which the patient is known to be in need of further care, but is transported by him self or others to the facility providing further care.

07 *No treatment required*

This code means that the EMS responder evaluated the patient, and no treatment was required. If the patient refused evaluation, or if the EMS responder did not evaluate a specific patient, this is not the correct code for this data element.

08 *Dead at scene*

This code means that the patient was pronounced dead at the scene, whether or not treatment was undertaken. If a patient is given CPR at the scene and transported to the hospital while undergoing CPR, then this is not the correct code. If a patient is given CPR and is then pronounced dead at the scene, this is the correct code.

09 *No patient found*

This code is used if a unit arrives on scene, but the responder can find no patient or there is no patient contact.

16.

Name of Data Element:	Primary Crewmember Certification Type		
Priority:	Mandatory		
Definition:	Personnel certification / license level of crew member		
Code:	Numeric entry.		
Field Length:	2		
Field Starting and Ending Position:	89 - 90		
Data Items:			
01	First Responder	08	Driver Only
02	EMT Basic	09	Driver with CPR
03	EMT Intermediate /85	10	Nurse
04	EMT Intermediate / 99	11	Physician
05	EMT Paramedic	12	Specialty Care Provider
06	Advanced First Aid Ambulance Attendant (AFAA)	13	Physician Assistant / Nurse Practitioner
07	Emergency Care Technician (ECT)	77	Other

Discussion and Justification: This data element permits assessing the highest level of care, which was available on the EMS responder team and the person responsible for completing the patient care report. By combining this information with vehicle type, there is maximum flexibility in describing the type of service, which was provided. For instance, any level of crewmember certification may be present with any type of vehicle. Reports of value may include descriptions of therapies according to level of provider, adherence to protocols which are written differently for various levels of provider, etc.

Business Rules: *All records submitted must have a Primary Crewmember Certification Type position entered.* Failure to supply the Primary Crewmember Certification position will flag the record as non-compliant. **Only the highest held Crewmember Certification Type** from the above data item list can be submitted. If the selected Crewmember Certification Type is not listed as 'Other' or 'Specialty Care Provider', then a North Dakota Department of Health, Division of EMS or other North Dakota State regulatory agency (RN/Physician) certification number is required for the corresponding Certification Number data element (refer to that data element's business rule section).

Technical Comments: This element captures the highest certification of the responder as recognized by the North Dakota Department of Health, Division of EMS and the person responsible for completion of the patient care report. Certifications held but not listed must be marked as 'Other'.

12 *Specialty Care Provider*

Any allied health care provider or specially trained health care provider such as a Respiratory Therapist, specially trained nurse.

17.

Name of Data Element:	Primary Crewmember Certification Number
Priority:	Essential
Definition:	Personnel certification / license number for first crewmember.
Code:	Numeric entry.
Field Length:	9
Field Starting and Ending Position:	91 - 99

Discussion and Justification: Necessary to identify specific crewmembers participating in an EMS response. Useful for constructing experience reports, monitoring care rendered by specific providers, planning educational programs.

Business Rules: Submission of a North Dakota Department of Health, Division of EMS or other North Dakota State regulatory agency (RN/Physician) certification number is required for the corresponding Certification Number data element. If the corresponding Crewmember Certification Type is listed as 'Other' or 'Specialty Care Provider' than the person's social security number should be used. Failure to supply a certification number when required will flag the record as non-compliant. If the crewmember position and associated crewmember certification type is not entered then the field must be left blank and filled with the appropriate number of spaces.

Technical Comments: This element is the unique certification number associated with the highest certification of the responder as assigned by the North Dakota Department of Health, Division of EMS or other North Dakota State regulatory agency. Enter only with digits do not provide hyphens or spaces.

18.

Name of Data Element:	Crewmember Two Certification Type		
Priority:	Essential		
Definition:	Personnel certification / license level of crewmember		
Code:	Numeric entry.		
Field Length:	2		
Field Starting and Ending Position:	100 - 101		
Data Items:			
01	First Responder	08	Driver Only
02	EMT Basic	09	Driver with CPR
03	EMT Intermediate /85	10	Nurse
04	EMT Intermediate / 99	11	Physician
05	EMT Paramedic	12	Specialty Care Provider
06	Advanced First Aid Ambulance Attendant (AFAA)	13	Physician Assistant / Nurse Practioner
07	Emergency Care Technician (ECT)	77	Other

Discussion and Justification: This data element permits assessing the highest level of care, which was available on the EMS responder team. By combining this information with vehicle type, there is maximum flexibility in describing the type of service, which was provided. For instance, any level of crewmember certification may be present with any type of vehicle.

Reports of value may include descriptions of therapies according to level of provider, adherence to protocols which are written differently for various levels of provider, etc.

Business Rules: Only the highest held Crewmember Certification Type from the above data item list can be submitted. If the selected Crewmember Certification Type is not listed as 'Other' or 'Specialty Care Provider', then an North Dakota Department of Health, Division of EMS or other North Dakota State regulatory agency (RN/Physician) certification number is required for the corresponding Certification Number data element (refer to that data element's business rule section). If the crewmember position on the incident is not filled then the field must be left blank and filled with the appropriate number of spaces.

Technical Comments: This element captures the highest certification of the responder as recognized by the North Dakota Department of Health, Division of EMS. Certifications held but not listed must be marked as 'Other'.

12 Specialty Care Provider

Any allied health care provider or specially trained health care provider such as a Respiratory Therapist, specially trained nurse.

19.

Name of Data Element:	Crewmember Two Certification Number
Priority:	Essential
Definition:	Personnel certification / license number for second crewmember.
Code:	Numeric or alpha/numeric entry.
Field Length:	9
Field Starting and Ending Position:	102 - 110

Discussion and Justification: Necessary to identify specific crewmembers participating in an EMS response. Useful for constructing experience reports, monitoring care rendered by specific providers, planning educational programs.

Business Rules: Submission of a North Dakota Department of Health, Division of EMS or other North Dakota State regulatory agency (RN/Physician) certification number is required for the corresponding Certification Number data element. If the corresponding Crewmember Certification Type is listed as 'Other' or 'Specialty Care Provider' than the person's social security number should be used. Failure to supply a certification number when required will flag the record as non-compliant. If the crewmember position and associated crewmember certification type is not entered then the field must be left blank and filled with the appropriate number of spaces.

Technical Comments: This element is the unique certification number associated with the highest certification of the responder as assigned by the North Dakota Department of Health, Division of EMS or other North Dakota State regulatory agency. Enter only with digits do not provide hyphens or spaces.

20.

Name of Data Element:	Crewmember Three Certification Type		
Priority:	Desirable		
Definition:	Personnel certification / license level of crewmember		
Code:	Numeric entry		
Field Length:	2		
Field Starting and Ending Position:	111 - 112		
Data Items:			
01	First Responder	08	Driver Only
02	EMT Basic	09	Driver with CPR
03	EMT Intermediate /85	10	Nurse
04	EMT Intermediate / 99	11	Physician
05	EMT Paramedic	12	Specialty Care Provider
06	Advanced First Aid Ambulance Attendant (AFAA)	13	Physician Assistant / Nurse Practioner
07	Emergency Care Technician (ECT)	77	Other

Discussion and Justification: This data element permits assessing the highest level of care, which was available on the EMS responder team. By combining this information with vehicle type, there is maximum flexibility in describing the type of service, which was provided. For instance, any level of crewmember certification may be present with any type of vehicle.

Reports of value may include descriptions of therapies according to level of provider, adherence to protocols which are written differently for various levels of provider, etc.

Business Rules: Only the highest held Crewmember Certification Type from the above data item list can be submitted. If the selected Crewmember Certification Type is not listed as 'Other' or 'Specialty Care Provider', then an North Dakota Department of Health, Division of EMS or other North Dakota State regulatory agency (RN/Physician) certification number is required for the corresponding Certification Number data element (refer to that data element's business rule section). If the crewmember position on the incident is not filled then the field must be left blank and filled with the appropriate number of spaces.

Technical Comments: This element captures the highest certification of the responder as recognized by the North Dakota Department of Health, Division of EMS. Certifications held but not listed must be marked as 'Other'.

12 *Specialty Care Provider*

Any allied health care provider or specially trained health care provider such as a Respiratory Therapist, specially trained nurse.

21.

Name of Data Element:	Crewmember Three Certification Number
Priority:	Desirable
Definition:	Personnel certification / license number for third crewmember.
Code:	Numeric or alpha/numeric entry.
Field Length:	9
Field Starting and Ending Position:	113 - 121

Discussion and Justification: Necessary to identify specific crewmembers participating in an EMS response. Useful for constructing experience reports, monitoring care rendered by specific providers, planning educational programs.

Business Rules: Submission of a North Dakota Department of Health, Division of EMS or other North Dakota State regulatory agency (RN/Physician) certification number is required for the corresponding Certification Number data element. If the corresponding Crewmember Certification Type is listed as 'Other' or 'Specialty Care Provider' than the person's social security number should be used. Failure to supply a certification number when required will flag the record as non-compliant. If the crewmember position and associated crewmember certification type is not entered then the field must be left blank and filled with the appropriate number of spaces.

Technical Comments: This element is the unique certification number associated with the highest certification of the responder as assigned by the North Dakota Department of Health, Division of EMS or other North Dakota State regulatory agency. Enter only with digits do not provide hyphens or spaces.

22.

Name of Data Element:	Crewmember Four Certification Type		
Priority:	Desirable		
Definition:	Personnel certification / license level of crewmember		
Code:	Numeric entry		
Field Length:	2		
Field Starting and Ending Position:	122 - 123		
Data Items:			
01	First Responder	08	Driver Only
02	EMT Basic	09	Driver with CPR
03	EMT Intermediate /85	10	Nurse
04	EMT Intermediate / 99	11	Physician
05	EMT Paramedic	12	Specialty Care Provider
06	Advanced First Aid Ambulance Attendant (AFAA)	13	Physician Assistant / Nurse Practioner
07	Emergency Care Technician (ECT)	77	Other

Discussion and Justification: This data element permits assessing the highest level of care, which was available on the EMS responder team. By combining this information with vehicle type, there is maximum flexibility in describing the type of service, which was provided. For instance, any level of crewmember certification may be present with any type of vehicle.

Reports of value may include descriptions of therapies according to level of provider, adherence to protocols which are written differently for various levels of provider, etc.

Business Rules: Only the highest held Crewmember Certification Type from the above data item list can be submitted. If the selected Crewmember Certification Type is not listed as 'Other' or 'Specialty Care Provider', then an North Dakota Department of Health, Division of EMS or other North Dakota State regulatory agency (RN/Physician) certification number is required for the corresponding Certification Number data element (refer to that data element's business rule section). If the crewmember position on the incident is not filled then the field must be left blank and filled with the appropriate number of spaces.

Technical Comments: This element captures the highest certification of the responder as recognized by the North Dakota Department of Health, Division of EMS. Certifications held but not listed must be marked as 'Other'.

12 Specialty Care Provider

Any allied health care provider or specially trained health care provider such as a Respiratory Therapist, specially trained nurse.

23.

Name of Data Element:	Crewmember Four Certification Number
Priority:	Desirable
Definition:	Personnel certification / license number for fourth crewmember.
Code:	Numeric or alpha/numeric entry.
Field Length:	9
Field Starting and Ending Position:	124 - 132

Discussion and Justification: Necessary to identify specific crewmembers participating in an EMS response. Useful for constructing experience reports, monitoring care rendered by specific providers, planning educational programs.

Business Rules: Submission of a North Dakota Department of Health, Division of EMS or other North Dakota State regulatory agency (RN/Physician) certification number is required for the corresponding Certification Number data element. If the corresponding Crewmember Certification Type is listed as 'Other' or 'Specialty Care Provider' than the person's social security number should be used. Failure to supply a certification number when required will flag the record as non-compliant. If the crewmember position and associated crewmember certification type is not entered then the field must be left blank and filled with the appropriate number of spaces.

Technical Comments: This element is the unique certification number associated with the highest certification of the responder as assigned by the North Dakota Department of Health, Division of EMS or other North Dakota State regulatory agency. Enter only with digits do not provide hyphens or spaces.

24.

Name of Data Element:	PSAP Time of Call (Time Incident Reported)
Priority:	Essential
Definition:	Time call is first received by Public Safety Answering Point (PSAP) or other designated entity.
Code:	Time format should be coded as HHMM
Field Length:	4
Field Starting and Ending Position:	133 - 136

Content: HH ranges from 00 to 23; MM ranges from 00 to 59. When available, the time should be the connect time to the PSAP.

Discussion and Justification: Provides the start point of the EMS response, and allows managers to assess the adequacy of EMS response, identify delays, and plan resources in a manner to provide expeditious EMS response.

Business Rules: If PSAP contact time is not reported, this field must be submitted or be filled with the same time as Dispatched.

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two-(2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

25.

Name of Data Element:	Dispatched (Time Unit Notified)
Priority:	Mandatory
Definition:	Time response unit is notified by EMS dispatch
Code:	Time format should be coded as HHMM.
Field Length:	4
Field Starting and Ending Position:	137 - 140

Content: HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: Permits measurement of the actual responder response or delays. Assists planning of communication resources for individual responders, and allows identification of system delays following the dispatch component of the EMS system.

Business Rules: *All records submitted **must** have a Dispatched time entered.* Records with missing or an invalid entry will be rejected and marked as non-compliant by the system.

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two-(2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

26.

Name of Data Element:	Enroute/Responding (Time Unit Responding)
Priority:	Essential
Definition:	Time that the response unit begins physical motion.
Code:	Time format should be coded as HHMM.
Field Length:	4
Field Starting and Ending Position:	141 - 144

Content: HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: Permits measurement of delay between notification of EMS responder and the actual mobilization of the response unit. This data element refers to physical motion of the responding EMS vehicle, and does not refer to individual EMTs who may respond directly to the scene when notified by individual radio or telephone. For example, if an EMS incident is reported, one EMT may be at home or at work and be responsible to go to the station, which holds the ambulance. Another EMT may be notified and may drive in a private vehicle directly to the scene. The data element entered should be the time that the ambulance actually leaves the station, not the time at which the other EMT drives to the scene in the private vehicle.

Business Rules: *Records submitted with any Incident Disposition code except 'Cancelled' **must** have a Responding time entered.* Records with a missing or an invalid entry will be rejected and marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two-(2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

27.

Name of Data Element:	Arrive Scene (Time arrival at scene)
Priority:	Essential
Definition:	Time EMS unit stops physical motion at scene (last place that the unit or vehicle stops prior to assessing the patient).
Code:	Time format should be coded as HHMM.
Field Length:	4
Field Starting and Ending Position:	145 - 148

Content: HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: Permits measurement of the time required for the response vehicle to go from the station to the scene. This data element refers to the physical motion of the responding EMS vehicle. If an individual EMT arrives at the scene by private vehicle that is NOT the value to be entered in this field. Otherwise, system delays in having an equipped vehicle at the scene will fail to be identified.

Business Rules: *Records submitted with an Incident Disposition code of 'Treated, Transported...', 'Care Transferred', 'Patient Refused', 'Treated, transported...vehicle', 'Treated and...', 'DOA', 'must have an Arrive Scene time entered. Required records with a missing or an invalid entry will be rejected and marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.*

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two-(2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

28.

Name of Data Element:	Arrive Patient (Time of arrival at patient)
Priority:	Desirable
Definition:	Time response personnel establish direct contact with patient.
Code:	Time format should be coded as HHMM.
Field Length:	4
Field Starting and Ending Position:	149 - 152

Content: HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: Desirable in certain situations in which there may be a significant delay between the time at which a response unit arrives at the scene and the time at which the personnel can access the patient. For example, if the EMTs are prevented because of fire or adverse conditions from approaching the patient, this time will be useful. Search and rescue operations will also note delays between arrival at the overall scene and the actual patient contact.

Business Rules: If Patient Contact time is not reported, this field must be submitted with the appropriate number of spaces or be filled with the same time as Arrive Scene (data element #24).

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two-(2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

29.

Name of Data Element:	Depart Scene (Time Unit Left Scene)
Priority:	Essential
Definition:	Time when the response unit begins physical motion from scene.
Code:	Time format should be coded as HHMM.
Field Length:	4
Field Starting and Ending Position:	153 - 156

Content: HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: Permits calculation of scene time by subtracting the time of arrival at scene from the time unit left scene.

Business Rules: *Records submitted with an Incident Disposition code of 'Treated, Transported...' **must** have a Depart Scene time entered.* Required records with a missing or an invalid entry will be rejected and marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two-(2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

30.

Name of Data Element:	Arrive Destination (Time Arrival at Facility/Destination)
Priority:	Essential
Definition:	Time when patient arrives at destination or transfer point.
Code:	Time format should be coded as HHMM.
Field Length:	4
Field Starting and Ending Position:	157 - 160

Content: HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: Permits calculation of the time required to go from the scene to the destination of the response unit. If the patient is transferred from one EMS responder vehicle to another, then the time of arrival at destination for the first responder is the time of arrival or patient contact (or both) for the second agency.

Business Rules: *Records submitted with an Incident Disposition code of 'Treated, Transported...' must have an Arrive Destination time entered.* Required records with a missing or an invalid entry will be rejected and marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two-(2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

31.

Name of Data Element:	Available (Time back in service)
Priority:	Mandatory
Definition:	Time response unit back in service and available for response.
Code:	Time format should be coded as HHMM.
Field Length:	4
Field Starting and Ending Position:	161 - 164

Content: HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: Allows planning of EMS resources. Permits assessment of the delay between arrival at destination and availability of the response unit.

Business Rules: *All records submitted **must** have an Available time entered.* Records with missing or an invalid entry will be rejected and marked as non-compliant by the system.

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two-(2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

32.

Name of Data Element:	Patient's First Name
Priority:	Desirable
Definition:	Patient's First Name.
Code:	Alpha/numeric entry
Field Length:	15
Field Starting and Ending Position:	165 - 179

Content: The appropriate number of spaces is used when there is no patient, such as when the responding team cannot find the patient, or when the responding team is on standby.

Discussion and Justification: Desirable because of its value in probabilistic linkage, both as a linking variable as well as a confirmatory variable to determine appropriate linkage. It is recognized that this data element requires careful protection from misuse, but it is more appropriate to regulate appropriate use of this field rather than to prevent its collection.

Business Rules: If Patient's First Name is not reported, this field must be submitted with the appropriate number of spaces.

Technical Comments: If middle initial is collected then submit with one space between the first name and initial. Submission of this data requires HIPAA compliance awareness on part of the agency and the software.

33.

Name of Data Element:	Patient's Last Name
Priority:	Desirable
Definition:	Patient's Last Name.
Code:	Alpha/numeric entry
Field Length:	15
Field Starting and Ending Position:	180 - 194

Content: The appropriate number of spaces is used when there is no patient, such as when the responding team cannot find the patient, or when the responding team is on standby.

Discussion and Justification: Essential because of its value in probabilistic linkage, both as a linking variable as well as a confirmatory variable to determine appropriate linkage. It is recognized that this data element requires careful protection from misuse, but it is more appropriate to regulate appropriate use of this field rather than to prevent its collection.

Business Rules: If Patient's Last Name is not reported, this field must be submitted with the appropriate number of spaces.

Technical Comments: Submission of this data requires HIPAA compliance awareness on part of the agency and the software.

34.

Name of Data Element:	Patient Street Address
Priority:	Desirable
Definition:	Patient's street address.
Code:	Alpha/numeric entry
Field Length:	30
Field Starting and Ending Position:	195 - 224

Content: The appropriate number of spaces is used when there is no patient, such as when the responding team cannot find the patient, or when the responding team is on standby.

Discussion and Justification: Essential because of its value in probabilistic linkage, both as a linking variable as well as a confirmatory variable to determine appropriate linkage. It is recognized that this data element requires careful protection from misuse, but it is more appropriate to regulate appropriate use of this field rather than to prevent its collection.

Business Rules: If Patient's Street Address is not reported, this field must be submitted with the appropriate number of spaces.

Technical Comments: Submission of this data requires HIPAA compliance awareness on part of the agency and the software.

35.

Name of Data Element:	City of Residence
Priority:	Desirable
Definition:	Patient' residence postal city (if applicable)
Code:	Alpha/numeric entry
Field Length:	30
Field Starting and Ending Position:	225 - 254

Content: The appropriate number of spaces is used when there is no patient, such as when the responding team cannot find the patient, or when the responding team is on standby.

Discussion and Justification: Essential because of its value in probabilistic linkage, both as a linking variable as well as a confirmatory variable to determine appropriate linkage. It is recognized that this data element requires careful protection from misuse, but it is more appropriate to regulate appropriate use of this field rather than to prevent its collection.

Business Rules: If Patient's City of Residence is not reported, this field must be submitted with the appropriate number of spaces.

Technical Comments: Submission of this data requires HIPAA compliance awareness on part of the agency and the software.

36.

Name of Data Element:	State of Residence
Priority:	Desirable
Definition:	State of patient's residence (if applicable)
Code:	Alphabetical entry
Field Length:	2
Field Starting and Ending Position:	255 - 256
Data Items: U.S. Post Office State Abbreviation	

Content: Code as two (2) -character fields using the U.S. Postal Service state abbreviation.

Discussion and Justification: Useful for determining the political entity responsible for potential public health interventions, payment for services, etc.

Business Rules: If Patient's State of Residence is not reported, this field must be submitted with the appropriate number of spaces.

Technical Comments: Submission of this data requires HIPAA compliance awareness on part of the agency and the software.

37.

Name of Data Element:	Zip Code of Residence
Priority:	Essential
Definition:	Zip Code of patient's residence
Code:	Numeric entry
Field Length:	5
Field Starting and Ending Position:	257 - 261
Data Items: U.S. Postal Service Zip Code listing. 99999 Unknown	

Content: Code as five (5) digit field using the approved U.S. Postal Service Zip Code listing.

Discussion and Justification: Useful for determining the political entity responsible for potential public health interventions, payment for services, etc. From Zip Code, county could be derived in software.

Business Rules: If Patient's Zip Code is not reported, this field must be submitted with the appropriate number of spaces.

Technical Comments: Submission of this data requires HIPAA compliance awareness on part of the agency and the software.

99999 *Unknown*

This code should only be used if submitting data elements #29-33 and the patient's zip code is unknown. Do not send this code if no patient encountered or not submitting above listed data elements. In such cases submit the appropriate number of spaces.

38.

Name of Data Element:	Social Security Number
Priority:	Desirable
Definition:	Patient Social Security number
Code:	Numeric entry.
Field Length:	9
Field Starting and Ending Position:	262 - 270
Data Items: {9 digit SSN} 888888888 Not Applicable 999999999 Unknown	

Content: Code as 9-digit field.

Discussion and Justification: Will provide valuable linkage data element. However, this field is very difficult for field responders to obtain.

Business Rules: If Patient's Social Security Number is not reported, this field must be submitted with the appropriate number of spaces.

Technical Comments: May be particularly valuable in jurisdictions where driver licenses or other forms of identification have bar coded Social Security numbers. Submission of this data requires HIPAA compliance awareness on part of the agency and the software.

999999999 *Unknown*

This code should only be used is submitting data elements #29-34 and the patient's social security number is unknown. Do not send this code if no patient encountered or not submitting above listed data elements. In such cases submit the appropriate number of spaces.

39.

Name of Data Element:	Date of Birth
Priority:	Essential
Definition:	Patient's date of birth.
Code:	Date format should be coded as MMDDYYYY
Field Length:	8
Field Starting and Ending Position:	271 - 278

Content: Format permits sorting across multiple years, and is recommended for data export purposes. Century digits are mandatory.

Discussion and Justification: Extremely valuable for probabilistic linkage and calculation of accurate age information. Provides much more discriminatory power in probabilistic linkage than the numeric age.

Business Rules: If Patient's DOB is not reported, this field must be submitted with the appropriate number of spaces.

Technical Comments: Format MMDDYYYY is recommended as part of FIPS standard. For month and day, use leading zeros if necessary to pad the fields to 2 characters each. Submission of this data requires HIPAA compliance awareness on part of the agency and the software.

40.

Name of Data Element:	Age
Priority:	Essential
Definition:	Patient's age or best approximation
Code:	Alpha/numeric entry.
Field Length:	4
Field Starting and Ending Position:	279 - 282
Data Items: {3 digits for age in years} 999 Unknown PLUS one of the following identifiers: Y = Years M = Months D = Days	

Content: Use leading zeros if necessary to pad the field to 4 positions. For patients over **1** year, specify **Y** (e.g. 6years = 006Y). For patients less than 1 year, specify **M** (e.g. 6 months = 006M). For patients less than 1 month, specify **D** (e.g. 6 days = 006D). For patients less than 1 day (24 hours), specify 001D. When the age is unknown, specify 999U.

Technical Comments: Age information permits linkage to other files and is useful for epidemiologists interested in patterns of emergency medical problem in different age groups.

Business Rules: *Records submitted with an Incident Disposition of "Treated, transported...", 'Care Transferred', 'Treated, transported...', 'Treated and ...', 'Patient refused care...' must have a Patient's Age entered.* Records with missing or an invalid entry will be rejected and marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Discussion and Justification: Valuable in the absence of a date of birth. Age information permits linkage to other files, and is useful for epidemiologists interested in patterns of emergency medical problems in different age groups.

41.

Name of Data Element:	Gender
Priority:	Essential
Definition:	Gender of patient.
Code:	Numeric entry.
Field Length:	2
Field Starting and Ending Position:	283 - 284
Data Items: <div style="text-align: right; padding-right: 40px;"> 01 Male 02 Female 99 Unknown </div>	

Discussion and Justification: Valuable for linkage to other files, and permits reporting of epidemiological information by gender.

Business Rules: *Records submitted with an Incident Disposition of “Treated, transported...”, “Care Transferred”, “Treated, transported... vehicle”, “Treated and ...”, “Patient refused care...” must have a Patient’s Gender entered.* Records with missing or an invalid entry will be rejected and marked as non-compliant by the system. **Only one (1)** item from the above data item list can be submitted. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments:

99 *Unknown*

This code should be used only when the sex of the patient cannot be accurately determined after patient contact. If no patient was encountered then the appropriate number of spaces should be submitted.

42.

Name of Data Element:	Race / Ethnicity		
Priority:	Desirable		
Definition:	Patient's ethnic origin.		
Code:	Numeric entry.		
Field Length:	2		
Field Starting and Ending Position:	285 - 286		
Data Items:			
01	Caucasian	05	Asian/Pacific Islander
02	Black or African American	77	Other Race
03	Hispanic or Latino	99	Unknown
04	American Indian/Alaska Native		

Discussion and Justification: Useful for epidemiological studies, and of importance to data systems in order to access certain types of Federal or state funds which are directed to specific ethnic groups.

Business Rules: Only one (1) Race / Ethnicity from the above data item list can be submitted. If the data element is not reported or no patient contact was made then this field must be submitted with the appropriate number of spaces.

Technical Comments:

77 Other

This code should be used when race can be determined but is not one of the races specified in the list.

99 Unknown

This code should be used when patient's race cannot be accurately determined due to decomposition, burns, etc. It is not to be used if no patient contact was made.

43.

Name of Data Element:	Vehicle Type
Priority:	Mandatory
Definition:	Type of vehicle, which responded to incident.
Code:	Numeric entry.
Field Length:	2
Field Starting and Ending Position:	287 - 288
Data Items: <div style="margin-left: 100px;"> 01 Ground 02 Rotor craft 03 Fixed wing </div>	

Discussion and Justification: Allows EMS managers and planners to break out EMS responses by the major categories of responding vehicles. While there are clearly numerous other possible vehicles, such as watercraft, skis, sleds, etc., the categories provided here are the major vehicle types, which will be of interest at regional and state levels.

For individual data systems in which there is more specific interest in other vehicles, additional categories may certainly be added. For purposes of exporting data to the NORTH DAKOTA STATE ONLINE AMBULANCE REPORTING dataset, these additional categories should be collapsed into the category *Other*.

Business Rules: *All records submitted **must** have a Vehicle Type entered.* Records with missing or an invalid Vehicle Type will be rejected and marked as non-compliant by the system.

44.

Name of Data Element:	Response Mode (Lights or Sirens to Scene)
Priority:	Essential
Definition:	The use of lights or sirens enroute to scene.
Code:	Numeric entry.
Field Length:	2
Field Starting and Ending Position	289 - 290
Data Items: 01 No lights or sirens 02 Used lights or sirens	

Discussion and Justification: To allow system administrators to know the frequency with which responder vehicles are using lights and sirens. Such usage carries explicit risks and EMS managers are responsible to assure that lights and sirens are used appropriately.

Business Rules: *Records submitted or requiring a Responding Time (data element #23) **must** have a Lights and Sirens to Scene code entered.* Required records with a missing or an invalid entry will be marked as non-compliant by the system. **Only one (1)** item from the above data item list can be submitted. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

45.

Name of Data Element:	Transport Mode (Lights or sirens used from scene)
Priority:	Essential
Definition:	Use of lights and/or sirens from the scene.
Code:	Numeric entry.
Field Length:	2
Field Starting and Ending Position:	291 - 292
Data Items: 01 No lights or sirens 02 Used lights or sirens	

Discussion and Justification: Allows system administrators to know the frequency with which responder vehicles are using lights and sirens. Such usage carries explicit risks and EMS managers are responsible to assure that lights and sirens are used appropriately.

Business Rules: *Records submitted or requiring an Arrive Destination (data element #27) must have a Lights and Sirens from the Scene code entered.* Required records with a missing or an invalid entry will be marked as non-compliant by the system. **Only one (1)** item from the above data item list can be submitted. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

46.

Name of Data Element:	Cause of Injury / Mechanism of Injury		
Priority:	Essential		
Definition:	External cause of injury.		
Code:	Numeric entry.		
Field Length:	10		
Field Starting and Ending Position:	293 - 302		
Data Items:			
01	Aircraft related accident	22	MCC – Motorcycle Collision
02	All Terrain Vehicle (ATV)	23	MVC – Motor Vehicle Collision
03	Animal Involvement	24	Off Road Vehicle Collision
04	Assault	25	Pedestrian traffic accident
05	Bicycle accident	26	Poisoning – Alcohol
06	Bite	27	Poisoning – Chemical
07	Blast / Explosion	28	Radiation exposure
08	Burns/thermal/chemical	29	Railway related accident
09	Choking	30	Rollerblade
10	Drowning	31	Self Inflicted
11	Drug poisoning	32	Skateboard
12	Electrocution	33	Skiing / Snowboarding
13	Excessive cold	34	Smoke inhalation
14	Excessive heat	35	Snowmobile
15	Falls	36	Stabbing / Cutting
16	Falls > 20 Feet	37	Suicide
17	Firearm injury	38	Natural Environmental Factor
18	Hanging	39	Venomous stings (plants, animals)
19	Lightning	40	Water transport accidents
20	Machinery accident	99	Unknown
21	Mechanical suffocation	88	Not applicable

Discussion and Justification: It is necessary to have a broad taxonomy for defining the external causes of injury, and this data element is coded according to the E codes in ICD-9. However, it is recognized that the entire E code list is too cumbersome for field use, and the element may be collapsed into the categories, which have been listed above.

When possible, the E code should be defined in as much detail as is present in the E code definitions. Such codes will always be collapsible to the categories defined here, but the added detail will provide additional value to injury prevention researchers. It has been traditional to attempt to assign a single E code to individual incidents. Multiple entries, however, aids in gathering better detail about injuries, and to eliminate confusion when the EMS provider must choose between two reasonable E codes.

Business Rules: *Records submitted with an Incident Disposition of “Treated, transported...” or ‘Care Transferred’ AND have an Incident Type marked as “Trauma” must have a Mechanism of Injury entered.* Records with missing or an invalid entry will be rejected and marked as non-compliant by the system. Other Incident Dispositions that involve patient contact may also submit this data element. **Up to five (5)** items from the above data item list can be submitted. Left justify with submission(s) and back fill with appropriate spaces to meet field length. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: This data element is based on E codes, but the coding structure is intended to be more flexible. Additional categories for not applicable and unknown have been added, so that this data element can always be filled in on the database. The item list is shown below, and the actual code number is indicated. When the code number includes lowercase x's, this means that the item list includes all E codes which have the initial part of the code. For example, motor vehicle traffic accident is coded as E81x.x, and would include any E code from E810.0 through E819.9.

01 *Aircraft related accident (E code E84x.x)*
Includes spacecraft.

02 *All Terrain Vehicle (E Code E821)*
Includes any involvement of incident with a motorized 3 or 4-wheeled vehicle intended for off road use.

03 *Animal Involvement (E Code Exxx.x)*
Includes any involvement of incident with accident. Examples would include MVA caused by deer in the roadway, or injuries from a dog bite, or MVA caused by distraction of driver due to cat in vehicle.

04 *Assault (E Code E967.x)*
Includes all forms of non-accidental injury or suspected intentional injury caused by others.

05 *Bicycle accident (E Code E826.x)*
Includes any pedal cycle accident. Pedal cycle is defined to include bicycles, tricycles, and excludes any motorized cycles.

06 *Bites (E Code E906.x)*

Includes all animal bites, including those from non-venomous snakes and lizards and those bites from animals of unknown venomous nature.

07 *Blast / Explosion (E Code E923.x)*

Includes any involvement of incident with blast or explosion.

08 *Burns/thermal/chemical (E Code E89x.x)*

Includes burning by fire, asphyxia or poisoning from conflagration (fire, wildfire) or ignition, and fires secondary to explosions.

09 *Choking (E Code E91x.x)*

Includes all injuries associated with choking by foreign or natural obstruction of airway. Not to be used for external mechanical suffocation.

10 *Drowning (E Code E910.x)*

Accidental drowning not related to watercraft use. Includes swimming accidents, bathtubs, etc.

11 *Drug poisoning (E Code E85x.x)*

Includes accidental poisoning by drugs, medicinal substances, or biological products. Extensive codes are available if an agency wishes to collect specific information.

12 *Electrocution (non-lightning) (E Code E925.x)*

Includes accidents related to electric current from exposed wire, faulty appliance, high voltage cable, live rail, or open electric socket. Excludes lightning, which is coded as 14 Lightning.

13 *Excessive cold (E Code E901.x)*

Includes cold injury due to weather exposure, or cold produced by man, such as in a freezer.

14 *Excessive heat (E code E900.x)*

Includes thermal injuries related to weather or heat produced by man, such as in a boiler room or factory. Excludes heat injury from conflagration.

15 *Falls (E Code E88x.x)*

Excludes falls, which occur in the context of other external causes of injury, such as fires, falling off boats, or falling in accidents involving machinery.

16 *Fall > 20 feet*

Same as Item 12 (Falls), but from a height greater than 20 feet.

17 *Firearm injury (E Code E985.x)*

These codes refer to firearm injuries involving handguns, shotguns, hunting rifles, etc.

18 *Hanging (E Code E9xx.x)*

Includes all injuries that are associated with hanging.

19 *Lightning (E Code E907.x)*

Excludes falling of an object secondary to lightning, and also excludes injuries from fire secondary to lightning.

20 *Machinery accidents (E Code E919.x)*

Includes all machinery accidents except when machinery is not in operation. Excludes electrocution.

21 *Mechanical suffocation (E Code E913.x)*

Includes suffocation in bed or cradle (crib death), closed space suffocation, plastic bag asphyxia, etc.

22 *MCC – Motorcycle Collision (E Code E819)*

This includes any motorcycle collision occurring on a public roadway or highway.

23 *MVC – Motor Vehicle Collision (E Code E812)*

This includes any motor vehicle collision occurring on a public roadway or highway.

24 *Off Road Vehicle Collision (E Code E820)*

This includes any vehicle collision occurring entirely off public roadways or highways. For instance, a collision involving an all terrain vehicle (ATV) in an off-road location would be a non-traffic crash.

25 *Pedestrian traffic crash (E Code E814.x)*

Motor vehicle crashes in which the patient was a pedestrian struck by a motor vehicle of any type. Includes individuals on skates, in baby carriages, in wheelchairs, on skateboards, etc.

26 *Poisoning - Alcohol (E Code E860.x)*

Includes accidental poisoning by alcoholic beverages.

27 *Poisoning -Chemical (E Code E86x.x)*

Includes accidental poisoning by solid or liquid substances, gases, and vapors, which are not included under accidental drug poisoning.

28 *Radiation exposure (E Code E926.x)*

Excludes complications of radiation therapy.

29 *Railway related accidents*

Includes any accidents that are related to the railway.

30 *Rollerblade (E Code E885.x)*

Includes any incidents that occurred during the activity of rollerblading.

31 *Self Inflicted (E Code E95x.x)*

Includes any injuries that are self-inflicted.

- 32 *Skateboard (E Code E885.x)*
Includes any incidents that occurred during the activity of skateboarding.
- 33 *Skiing / Snowboarding (E Code E885.x)*
Includes any incidents that occurred during the activity of skiing or snowboarding.
- 34 *Smoke inhalation (E Code E89x.2)*
Includes smoke and fume inhalation from conflagration.
- 35 *Snowmobile (E Code E820)*
Includes any incidents that occurred during the activity of or involving a snowmobile.
- 36 *Stabbing / Cutting (E Code E966.x)*
Includes cuts, punctures, or stabs of any part of the body.
- 37 *Suicide (E Code E95.x.x)*
Includes any incidents involving a suicide.
- 38 *Unintentional Natural Environmental Factors (E Code E90x.x)*
Includes any incidents that involved or associated with a natural environmental factor. A few examples would include a MVA due to icy road conditions or a structure collapse due to tornado.
- 39 *Venomous stings (plants, animals) (E Code E905.x)*
Includes only those bites and stings from snakes, lizards, spiders, scorpion, insects, marine life, or plants known to be venomous.
- 40 *Water transport accident (E Code E83x.x)*
Includes all accidents related to watercraft. Excludes drowning and submersion accidents unless they are related to watercraft use. Thus, if a person falls out of a boat and drowns, it should be coded within this category. If a person drowns in a swimming pool or bathtub, it should be coded as 07 Drowning.
- 88 *Not Applicable*
This code should be used where an external injury code does not apply, such as when a patient suffers from chest pain or fever. In nearly all instances where an injury has occurred, this data element should be filled in with a valid code, other than the Not Applicable designation.
- 99 *Unknown*
Includes any incident where the cause of injury or mechanism is unknown to the reporter.

47.

Name of Data Element:	Pertinent Pre-Existing Conditions		
Priority:	Essential		
Definition:	Pre-existing medical conditions known to the provider.		
Code:	Numeric entry		
Field Length:	10		
Field Starting and Ending Position:	303 - 312		
Data Items:			
01	Asthma	10	Seizure disorder
02	Cancer	11	Chronic respiratory failure
03	Diabetes	12	Transient Cerebral Ischemia
04	Dementia	13	Heart Disease
05	Hypertension	14	Chronic renal failure
06	CVA/Stroke	15	Pregnancy
07	Psychiatric problems	77	Other
08	COPD	88	None stated
09	Immunosuppressed	99	Not Obtainable

Discussion and Justification: Pertinent pre-existing conditions may affect the protocols followed by EMS responders. The data element is intended to capture information as understood by EMS providers at the scene, not as defined later in the medical record of the hospital. Thus, if the EMS responder finds out that a patient has several pre-existing conditions after he or she arrives at the hospital, those conditions should not be coded in this data element. It is clear that the list provided here may not include other important conditions. Other conditions should be added as desired, but it is hoped that the above conditions will be included in all data sets. Up to 5 Pre-existing Conditions can be selected.

Business Rules: Records submitted with an Incident Disposition of “Treated, transported...”, “Care Transferred”, “Treat, transported...vehicle”, “Treated and ...”, “Patient refused...” **must** have a Pre-Existing Condition entered. Records with a missing or an invalid entry will be marked as non-compliant by the system. **Up to five (5)** items from the above data item list can be submitted. Left justify with submission(s) and back fill with appropriate spaces to meet field length. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments:

88 *None stated*

This is to be coded if a conscious patient or family member when asked responded in a manner interpreted to mean that the patient had no pre-existing conditions. This is not to be coded if no patient contact was made.

99 *Not Obtainable*

This is to be coded if the patient was not asked or the patient was unable to respond to the question. This is not to be coded if no patient contact was made.

48.

Name of Data Element:	Complaint Reported by Dispatch																																				
Priority:	Essential																																				
Definition:	The primary complaint reported to or received at dispatch																																				
Code:	Numeric entry.																																				
Field Length:	2																																				
Field Starting and Ending Position:	313 - 314																																				
<p>Data Items:</p> <table> <tr> <td>01 Abdominal pain</td><td>19 Heat/Cold exposure</td></tr> <tr> <td>02 Allergies</td><td>20 Hemorrhage/Laceration</td></tr> <tr> <td>03 Animal Bite</td><td>21 Industrial accident</td></tr> <tr> <td>04 Assault</td><td>22 Ingestion/Poisoning</td></tr> <tr> <td>05 Back pain</td><td>23 Pregnancy/Childbirth/GYN</td></tr> <tr> <td>06 Breathing Problems</td><td>24 Psychiatric problems</td></tr> <tr> <td>07 Burns</td><td>25 Seizures/Convulsions</td></tr> <tr> <td>08 CO Poisoning</td><td>26 Sick person</td></tr> <tr> <td>09 Cardiac Arrest</td><td>27 Skin rash / Blister</td></tr> <tr> <td>10 Chest Pains</td><td>28 Stab/Gunshot wound</td></tr> <tr> <td>11 Choking</td><td>29 Stroke/CVA</td></tr> <tr> <td>12 Diabetic problem</td><td>30 Traffic Accident</td></tr> <tr> <td>13 Drowning</td><td>31 Traumatic injury</td></tr> <tr> <td>14 Electrocutation</td><td>32 Unconscious/Fainting</td></tr> <tr> <td>15 Eye problem</td><td>33 Interfacility/Transfer</td></tr> <tr> <td>16 Fall victim</td><td>77 Other</td></tr> <tr> <td>17 Headache</td><td>99 Unknown Problem</td></tr> <tr> <td>18 Heart Problems</td><td></td></tr> </table>		01 Abdominal pain	19 Heat/Cold exposure	02 Allergies	20 Hemorrhage/Laceration	03 Animal Bite	21 Industrial accident	04 Assault	22 Ingestion/Poisoning	05 Back pain	23 Pregnancy/Childbirth/GYN	06 Breathing Problems	24 Psychiatric problems	07 Burns	25 Seizures/Convulsions	08 CO Poisoning	26 Sick person	09 Cardiac Arrest	27 Skin rash / Blister	10 Chest Pains	28 Stab/Gunshot wound	11 Choking	29 Stroke/CVA	12 Diabetic problem	30 Traffic Accident	13 Drowning	31 Traumatic injury	14 Electrocutation	32 Unconscious/Fainting	15 Eye problem	33 Interfacility/Transfer	16 Fall victim	77 Other	17 Headache	99 Unknown Problem	18 Heart Problems	
01 Abdominal pain	19 Heat/Cold exposure																																				
02 Allergies	20 Hemorrhage/Laceration																																				
03 Animal Bite	21 Industrial accident																																				
04 Assault	22 Ingestion/Poisoning																																				
05 Back pain	23 Pregnancy/Childbirth/GYN																																				
06 Breathing Problems	24 Psychiatric problems																																				
07 Burns	25 Seizures/Convulsions																																				
08 CO Poisoning	26 Sick person																																				
09 Cardiac Arrest	27 Skin rash / Blister																																				
10 Chest Pains	28 Stab/Gunshot wound																																				
11 Choking	29 Stroke/CVA																																				
12 Diabetic problem	30 Traffic Accident																																				
13 Drowning	31 Traumatic injury																																				
14 Electrocutation	32 Unconscious/Fainting																																				
15 Eye problem	33 Interfacility/Transfer																																				
16 Fall victim	77 Other																																				
17 Headache	99 Unknown Problem																																				
18 Heart Problems																																					

Discussion and Justification: This data element is intended to capture the information provided to or obtained by the PSAP or dispatch center and transmitted to the EMS responder.

Business Rules: *All records submitted must have a Complaint Reported by Dispatch entered.* Records with missing or an invalid Complaint Reported by Dispatch will be rejected and marked as non-compliant by the system. **Only one (1) Complaint Reported by Dispatch** from the above data item list can be submitted.

Technical Comments: It is intended that the dispatch complaint be correlated with the clinical impression of the responder. This would help EMS planners with assessing dispatch triage and protocols in use.

77 *Other*

This is to be coded in situations where the complaint reported at dispatch does not meet the list provided.

99 *Unknown*

This is to be coded if no complaint was reported at dispatch or if the complaint was for an unknown problem. This is not to be used if self dispatched or alerted by other means and the reporter is aware of the type of problem they are responding to.

49.

Name of Data Element:	Signs and Symptoms Present																																		
Priority:	Essential																																		
Definition:	Signs and symptoms reported to or observed by provider.																																		
Code:	Numeric entry.																																		
Field Length:	10																																		
Field Starting and Ending Position:	315 - 324																																		
<p>Data Items:</p> <table> <tr> <td>01 Abdominal pain</td><td>18 Nausea / Vomiting</td></tr> <tr> <td>02 Back pain</td><td>19 Neck pain</td></tr> <tr> <td>03 Bloody stools</td><td>20 Pain – Non specific</td></tr> <tr> <td>04 Breathing difficulty</td><td>21 Paralysis</td></tr> <tr> <td>05 Cardioresp. Arrest</td><td>22 Palpitations</td></tr> <tr> <td>06 Chest pain / Discomfort</td><td>23 Petecheaie, non-traumatic ecchymosis</td></tr> <tr> <td>07 Choking</td><td>24 Pregnancy/childbirth/miscarriage</td></tr> <tr> <td>08 Coma</td><td>25 Seizures/convulsions</td></tr> <tr> <td>09 Cough, pneumonia, URI</td><td>26 Sepsis</td></tr> <tr> <td>10 Diarrhea</td><td>27 Skin rash / Blister with unknown origin</td></tr> <tr> <td>11 Dizziness</td><td>28 Syncope</td></tr> <tr> <td>12 Ear pain</td><td>29 Unresponsive/unconscious</td></tr> <tr> <td>13 Eye pain</td><td>30 Vaginal bleeding</td></tr> <tr> <td>14 Fever/Hyperthermia</td><td>31 Weakness (malaise)</td></tr> <tr> <td>15 Headache</td><td>33 Psychiatric</td></tr> <tr> <td>16 Hypertension</td><td>100 Other</td></tr> <tr> <td>17 Hypothermia</td><td></td></tr> </table>		01 Abdominal pain	18 Nausea / Vomiting	02 Back pain	19 Neck pain	03 Bloody stools	20 Pain – Non specific	04 Breathing difficulty	21 Paralysis	05 Cardioresp. Arrest	22 Palpitations	06 Chest pain / Discomfort	23 Petecheaie, non-traumatic ecchymosis	07 Choking	24 Pregnancy/childbirth/miscarriage	08 Coma	25 Seizures/convulsions	09 Cough, pneumonia, URI	26 Sepsis	10 Diarrhea	27 Skin rash / Blister with unknown origin	11 Dizziness	28 Syncope	12 Ear pain	29 Unresponsive/unconscious	13 Eye pain	30 Vaginal bleeding	14 Fever/Hyperthermia	31 Weakness (malaise)	15 Headache	33 Psychiatric	16 Hypertension	100 Other	17 Hypothermia	
01 Abdominal pain	18 Nausea / Vomiting																																		
02 Back pain	19 Neck pain																																		
03 Bloody stools	20 Pain – Non specific																																		
04 Breathing difficulty	21 Paralysis																																		
05 Cardioresp. Arrest	22 Palpitations																																		
06 Chest pain / Discomfort	23 Petecheaie, non-traumatic ecchymosis																																		
07 Choking	24 Pregnancy/childbirth/miscarriage																																		
08 Coma	25 Seizures/convulsions																																		
09 Cough, pneumonia, URI	26 Sepsis																																		
10 Diarrhea	27 Skin rash / Blister with unknown origin																																		
11 Dizziness	28 Syncope																																		
12 Ear pain	29 Unresponsive/unconscious																																		
13 Eye pain	30 Vaginal bleeding																																		
14 Fever/Hyperthermia	31 Weakness (malaise)																																		
15 Headache	33 Psychiatric																																		
16 Hypertension	100 Other																																		
17 Hypothermia																																			

Discussion and Justification: This data element is intended to capture the information provided to or obtained by the EMS responder in order to assess the patient.

Business Rules: *Records submitted with an Incident Disposition of “Treated, transported...”, “Care Transferred”, “Treat, transported...vehicle”, “Treated and ...”, “Patient refused...” must have a Sign and Symptom Present entered.* Records with a missing or an invalid entry will be marked as non-compliant by the system. **Up to five (5)** items from the above data item list can be submitted. Left justify with submission(s) and back fill with appropriate spaces to meet field length. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: It is intended that these signs and symptoms be correlated with the clinical impression of the responder. This would help EMS managers plan educational programs for the responders.

77 *Other*

This is to be coded in situations where there are signs and symptoms but they are not on the list.

50.

Name of Data Element:	Provider Impression																																												
Priority:	Essential																																												
Definition:	Provider's clinical impression, which led to the management given to the patient (treatments, medications, procedures).																																												
Code:	Numeric entry.																																												
Field Length:	2																																												
Field Starting and Ending Position:	325 - 326																																												
<p>Data Items:</p> <table> <tr> <td>01 Abdominal pain w/ other symptoms</td><td>26 Pain, acute and severe</td></tr> <tr> <td>02 Abnormal Cardiac Rhythm</td><td>27 Back pain - non-traumatic suspect</td></tr> <tr> <td>03 Abnormal skin signs</td><td>28 Poisons ingested, injected</td></tr> <tr> <td>04 Allergic Reaction - Life Threatening</td><td>29 Alcohol Intoxication, drug overdose</td></tr> <tr> <td>05 Animal bites/sting</td><td>30 Post Op procedure complications</td></tr> <tr> <td>06 Animal bites/sting/envenomation</td><td>31 Pregnancy – complications/birth</td></tr> <tr> <td>07 Sexual assault w/ injuries</td><td>32 Psychiatric/Behavioral - abnormal</td></tr> <tr> <td>08 Blood Glucose - abnormal</td><td>33 Unconscious, fainting, syncope</td></tr> <tr> <td>09 Respiratory Arrest</td><td>34 Near syncope, weakness or dizziness</td></tr> <tr> <td>10 Difficulty breathing</td><td>35 Medical/legal</td></tr> <tr> <td>11 Cardiac arrest - resuscitation</td><td>36 Major Trauma</td></tr> <tr> <td>12 Chest pain (non-traumatic)</td><td>37 Other Trauma - Monitor/Maintain Airway</td></tr> <tr> <td>13 Choking episode</td><td>38 Other Trauma - Major Bleeding</td></tr> <tr> <td>14 Cold exposure - life or limb threatening</td><td>39 Burns</td></tr> <tr> <td>15 Altered level of consciousness</td><td>40 Lightning</td></tr> <tr> <td>16 Convulsions/seizures</td><td>41 Electrocution</td></tr> <tr> <td>17 Eye symptoms (non-traumatic)</td><td>42 Near Drowning</td></tr> <tr> <td>18 Non-traumatic headache - w/ neuro</td><td>43 Eye injuries</td></tr> <tr> <td>19 Cardiac Symptoms - Not chest pain</td><td>44 Bed Confined</td></tr> <tr> <td>20 Heat exposure - life threatening</td><td>45 ALS, monitoring required</td></tr> <tr> <td>21 Hemorrhage - Severe</td><td>46 Specialty care monitoring</td></tr> <tr> <td>22 Hemorrhage - Life Threatening</td><td>47 Medical conditions</td></tr> </table>		01 Abdominal pain w/ other symptoms	26 Pain, acute and severe	02 Abnormal Cardiac Rhythm	27 Back pain - non-traumatic suspect	03 Abnormal skin signs	28 Poisons ingested, injected	04 Allergic Reaction - Life Threatening	29 Alcohol Intoxication, drug overdose	05 Animal bites/sting	30 Post Op procedure complications	06 Animal bites/sting/envenomation	31 Pregnancy – complications/birth	07 Sexual assault w/ injuries	32 Psychiatric/Behavioral - abnormal	08 Blood Glucose - abnormal	33 Unconscious, fainting, syncope	09 Respiratory Arrest	34 Near syncope, weakness or dizziness	10 Difficulty breathing	35 Medical/legal	11 Cardiac arrest - resuscitation	36 Major Trauma	12 Chest pain (non-traumatic)	37 Other Trauma - Monitor/Maintain Airway	13 Choking episode	38 Other Trauma - Major Bleeding	14 Cold exposure - life or limb threatening	39 Burns	15 Altered level of consciousness	40 Lightning	16 Convulsions/seizures	41 Electrocution	17 Eye symptoms (non-traumatic)	42 Near Drowning	18 Non-traumatic headache - w/ neuro	43 Eye injuries	19 Cardiac Symptoms - Not chest pain	44 Bed Confined	20 Heat exposure - life threatening	45 ALS, monitoring required	21 Hemorrhage - Severe	46 Specialty care monitoring	22 Hemorrhage - Life Threatening	47 Medical conditions
01 Abdominal pain w/ other symptoms	26 Pain, acute and severe																																												
02 Abnormal Cardiac Rhythm	27 Back pain - non-traumatic suspect																																												
03 Abnormal skin signs	28 Poisons ingested, injected																																												
04 Allergic Reaction - Life Threatening	29 Alcohol Intoxication, drug overdose																																												
05 Animal bites/sting	30 Post Op procedure complications																																												
06 Animal bites/sting/envenomation	31 Pregnancy – complications/birth																																												
07 Sexual assault w/ injuries	32 Psychiatric/Behavioral - abnormal																																												
08 Blood Glucose - abnormal	33 Unconscious, fainting, syncope																																												
09 Respiratory Arrest	34 Near syncope, weakness or dizziness																																												
10 Difficulty breathing	35 Medical/legal																																												
11 Cardiac arrest - resuscitation	36 Major Trauma																																												
12 Chest pain (non-traumatic)	37 Other Trauma - Monitor/Maintain Airway																																												
13 Choking episode	38 Other Trauma - Major Bleeding																																												
14 Cold exposure - life or limb threatening	39 Burns																																												
15 Altered level of consciousness	40 Lightning																																												
16 Convulsions/seizures	41 Electrocution																																												
17 Eye symptoms (non-traumatic)	42 Near Drowning																																												
18 Non-traumatic headache - w/ neuro	43 Eye injuries																																												
19 Cardiac Symptoms - Not chest pain	44 Bed Confined																																												
20 Heat exposure - life threatening	45 ALS, monitoring required																																												
21 Hemorrhage - Severe	46 Specialty care monitoring																																												
22 Hemorrhage - Life Threatening	47 Medical conditions																																												

23 Infectious diseases – Isolation/Health risk	48 Service not available at originating risk
24 Medical Device Failure	77 Other - Not listed
25 Neurologic Distress	

Discussion and Justification: This data element contains the single clinical assessment, which primarily drove the actions of the EMS responder. It should be possible to determine whether the treatments or medications provided match protocols, which relate to the clinical impression. When more than one choice is applicable to a patient, the responder should indicate the single most important clinical assessment that drove most of the plan of therapy and management.

It should be noted that this coding system differs from current systems. For instance, many EMS data sets include the entity, Animal Bite. In the uniform data set, such an entry should be coded in this field as a Traumatic Injury. The site of injury should be indicated in the injury field described later in this dictionary, showing the type (laceration or puncture) and site of the bite itself. In addition, the Cause of Injury should be coded as E906.x as discussed under the data element, Cause of Injury. For another example, Sexual Assault is coded in this data element in the same manner as a Traumatic Injury, but the Cause of Injury would be coded as E960.1, and Injury Intent would be coded as intentional. The reason for using this approach is to avoid overlapping, duplicative codes, which are not attached to a general taxonomy such as ICD9. Such codes would become agency specific and would not be flexible enough to permit combining data from different agencies. This list is comprised of the Federal Register Condition Codes.

Business Rules: *Records submitted with an Incident Disposition of “Treated, transported...”, “Care Transferred”, “Treat, transported... vehicle”, “Treated and ...”, “Patient refused...” must have a Provider Impression entered.* Records with a missing or an invalid entry will be marked as non-compliant by the system. **Only one (1)** item from the above data item list can be submitted. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: The field width should always be 2 digits in length. Therefore, data items should be zero padded on the left to assure interpretability. The list provided here is not all-inclusive and is based on the CMS condition codes.

77 Other

This code should be used when none of the codes listed can be applied; however, there is enough information for a clinical impression to be made by the EMS provider.

51.

Name of Data Element:	Scene Factors Affecting EMS Delivery of Care		
Priority:	Mandatory		
Definition:	Special circumstances affecting the EMS response or delivery of care.		
Code:	Numeric entry.		
Field Length:	10		
Field Starting and Ending Position:	327 - 336		
Data Items:			
01	Adverse weather	08	Prolonged extrication (>20 min)
02	Adverse road conditions	09	Hazardous material
03	Vehicle problems	10	Crowd Control
04	Unsafe scene	11	Delay in EMS access
05	Uncooperative patient	12	Delay in Detection
06	Biological Hazards	13	Mass Casualty Incident
07	Language barrier	88	Not Applicable

Discussion and Justification: For systems planners who are evaluating response times, this data element provides explanations for delays encountered in the system. For instance, the time to scene would be expected to be prolonged if there was a blizzard, or if gunfire prevented EMS responders from patient access. If there were no problem with EMS delivery, this data element would be coded as not applicable.

Business Rules: All *Records* submitted **must** have a *Scene Factor Affecting EMS Delivery of Care* entered. Records with missing or an invalid entry will be marked as non-compliant by the system. **Up to five (5)** items from the above data item list can be submitted. Left justify with submission(s) and back fill with appropriate spaces to meet field length.

Technical Comments: Unsafe scene includes presence of gunfire, instances in which police prevented access because of safety concerns, etc. A vehicle problem includes problems with the EMS responder vehicle itself, not with other vehicles that might have obstructed traffic. Extrication has been moved into this data element because extrication is not a patient treatment and relates less to the medical care of the patient than to the environment in which EMS responders must work.

88 *Not Applicable*

This is to be coded when there were no factors affecting the delivery of EMS for the incident. This may also be used if no patient contact was made.

52.

Name of Data Element:	Injury Description																								
Priority:	Essential																								
Definition:	Clinical description of injury type and body site.																								
Code:	Alphabetic and numeric entry.																								
Field Length:	10																								
Field Starting and Ending Position:	337 - 346																								
<p>Data Items:</p> <table> <tr> <td><u>Body Sites</u></td><td><u>Injury Types</u></td></tr> <tr> <td>A Head only (<i>excluding neck, cervical spine and ear</i>)</td><td>1. Soft Tissue - Closed</td></tr> <tr> <td>B Face (<i>including ear</i>)</td><td>2 Blunt injury</td></tr> <tr> <td>C Neck</td><td>3 Soft Tissue - Open</td></tr> <tr> <td>D Thorax (<i>excluding thoracic spine</i>)</td><td>4 Dislocation/fracture</td></tr> <tr> <td>E Abdomen (<i>excluding lumbar spine</i>)</td><td>5 Puncture/stab</td></tr> <tr> <td>F Spine</td><td>6 Gunshot</td></tr> <tr> <td>G Upper extremities</td><td>7 Amputation</td></tr> <tr> <td>H Lower extremities</td><td>8 Crush</td></tr> <tr> <td>I Body region unspecified</td><td>9 Burn</td></tr> <tr> <td>J Pelvic</td><td></td></tr> <tr> <td>88 None Reported</td><td></td></tr> </table>		<u>Body Sites</u>	<u>Injury Types</u>	A Head only (<i>excluding neck, cervical spine and ear</i>)	1. Soft Tissue - Closed	B Face (<i>including ear</i>)	2 Blunt injury	C Neck	3 Soft Tissue - Open	D Thorax (<i>excluding thoracic spine</i>)	4 Dislocation/fracture	E Abdomen (<i>excluding lumbar spine</i>)	5 Puncture/stab	F Spine	6 Gunshot	G Upper extremities	7 Amputation	H Lower extremities	8 Crush	I Body region unspecified	9 Burn	J Pelvic		88 None Reported	
<u>Body Sites</u>	<u>Injury Types</u>																								
A Head only (<i>excluding neck, cervical spine and ear</i>)	1. Soft Tissue - Closed																								
B Face (<i>including ear</i>)	2 Blunt injury																								
C Neck	3 Soft Tissue - Open																								
D Thorax (<i>excluding thoracic spine</i>)	4 Dislocation/fracture																								
E Abdomen (<i>excluding lumbar spine</i>)	5 Puncture/stab																								
F Spine	6 Gunshot																								
G Upper extremities	7 Amputation																								
H Lower extremities	8 Crush																								
I Body region unspecified	9 Burn																								
J Pelvic																									
88 None Reported																									

Content: Intended to permit the detailed listing of all injuries sustained by a patient, coded according to injury type and body site of the injury. Multiple entries will be possible. Each injury should be designated by body site and injury type. The most severe 3 injuries should be recorded.

The body sites included, as Data Items are consistent with body areas used to calculate the Injury Severity Score (ISS). This list is slightly expanded from the usual ISS, but is easily collapsed if necessary.

Business Rules: *Records submitted with an Incident Disposition of 'Treated, transported...' or 'Care Transferred' AND ONLY have an Incident Type marked as 'Trauma' or 'Fire' **must** have an Injury Description entered.* Records with missing or an invalid entry will be marked as non-compliant by the system. Other Incident Dispositions that involve patient contact may also submit this data element. **Up to ten (10)** items from the above data item list can be submitted. Left justify with submission(s) and back fill with appropriate spaces to meet field length. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Discussion and Justification: This is a crucial data element, which will enable EMS planners to know what types of injuries are incurred by patients using the EMS system. The data element will also be of value in assessing the correspondence between injury assessment in the field and actual injuries as evaluated in medical facilities. A major reason for using ISS related body sites is the ability to compare the hospital inpatient ISS areas with those indicated by the prehospital provider.

It is understood that various levels of providers will be permitted to make injury assessments at different levels of sophistication. For example, the diagnosis of fracture is considered out of scope for many prehospital responders. In this case, a term might be added for swelling, or some other marker by which an EMS responder is supposed to suspect a fracture or dislocation. It is stressed that this data element is supposed to reflect the clinical impression of injury by the EMS responder, not necessarily the final, correct medical diagnosis.

Technical Comments:

88 *None Reported*

This is to be coded if there are no injuries noted or reported by the patient.

53.

Name of Data Element:	Safety Devices		
Priority:	Essential		
Definition:	Safety equipment in use by patient at time of injury.		
Code:	Numeric entry.		
Field Length:	10		
Field Starting and Ending Position:	347 - 356		
Data Items:			
01	None used	09	Helmet
02	Lap belt only	10	Eye protection
03	Shoulder belt only	11	Protective clothing
04	Shoulder and lap belt	12	Respiratory protection
05	Child safety seat	13	Personal flotation device
06	Airbag deployed	14	Smoke / Co Detector
07	Airbag – Not deployed	88	Not applicable
08	Harness		

Discussion and Justification: Provides important information about safety device use in motor vehicle accidents, boating accidents, and industrial accidents with eye injuries. Data will be of use for corroboration of police reports concerning crashes.

Business Rules: *Records submitted with an Incident Disposition of ‘Treated, transported...’ or ‘Care Transferred’ AND ONLY have an Incident Type marked as ‘Trauma’ or ‘Fire’ must have a Safety Device entered.* Records with missing or an invalid entry will be marked as non-compliant by the system. Other Incident Dispositions that involve patient contact may also submit this data element as appropriate. **Up to five (5)** items from the above data item list can be submitted. Left justify with submission(s) and back fill with appropriate spaces to meet field length. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: If the EMS responder knows that no safety device was employed, then the data element should be coded as none. If none of the indicated devices was used, the element should also be coded as none.

88 *Not Applicable*

This is to be coded when no safety devices were indicated based on the nature of the call. This is not to be used if no patient contact was made.

54.

Name of Data Element:	Motor Vehicle Impact		
Priority:	Essential		
Definition:	Motor Vehicle Impact site during collision.		
Code:	Numeric entry.		
Field Length:	6		
Field Starting and Ending Position:	357 - 362		
Data Items:			
01	Head-on	06	Rollover
02	Lateral	07	Rotation
03	Ejection	77	Not listed
04	Rear	88	Not applicable
05	Intrusion		

Content: This data element is coded as a two (2)-position field that provides information about the site of collision during a Motor Vehicle Impact, which can be used to predict injury patterns. Data will be used for corroboration of police reports concerning crashes. Up to three (3) Motor Vehicle Impact sites can be selected.

Business Rules: *Records submitted with an Incident Disposition of 'Treated, transported...' or 'Care Transferred' AND ONLY have an Incident Type marked as 'Trauma' and a 'Mechanism of Injury' involving a motor vehicle **must** have a Motor Vehicle Impact entered.* Records with missing or an invalid entry will be marked as non-compliant by the system. Other appropriate incidents that involve patient contact may also submit this data element as appropriate. **Up to three (3)** items from the above data item list can be submitted. Left justify with submission(s) and back fill with appropriate spaces to meet field length. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments:

77 *Not Listed*

This code should be used when the data element "Mechanism of Injury" is related to a Motor Vehicle but the Motor Vehicle Impact site not listed.

88 *Not Applicable*

This code should be used when the data element "Mechanism of Injury" is related to a Motor Vehicle but no impact was found. This is not to be used if the field is not appropriate for the incident.

55.

Name of Data Element:	Witnessed Cardiac Arrest
Priority:	Essential
Definition:	If the cardiac arrest was witnessed by anyone.
Code:	Numeric entry.
Field Length:	2
Field Starting and Ending Position:	363 - 364
Data Items: 01 Yes 02 No 03 Unknown 88 Not Applicable	

Content: This data element is coded as a 2-position field that provides information concerning the incidence of witnessed cardiac arrests.

Business Rules: *Records submitted that require and have a Time of Cardiac Arrest marked and a Procedure OR Treatment of 'CPR' OR Time of First CPR marked **must** have Witnessed Cardiac Arrest entered.* Records with a missing or an invalid entry will be marked as non-compliant by the system. **Only one (1)** item from the above data item list can be submitted. If the incident is appropriate to not report this data element, then this field must be submitted with the Non applicable code.

Technical Comments:

03 *Unknown*

Unknown should only be used if the incident involved a cardiac arrest and the provider is unaware of the correct answer.

88 *Not Applicable*

This is to be used if the field is not appropriate for the incident.

56.

Name of Data Element:	Time of Cardiac Arrest
Priority:	Desirable
Definition:	Time of estimated cardiac arrest.
Code:	Time format should be coded as HHMM.
Field Length:	4
Field Starting and Ending Position:	365 - 368

Content: Time format should be coded as HHMM. HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: Allows assessment of actual total arrest time in patients with cardiac arrest. This information is valuable for researchers and educators concerned with CPR training.

Business Rules: *Records submitted with an Incident Disposition of "Treated, transported...", "Care Transferred", "Treated and ...", AND have a Procedure or Treatment of CPR or a Sign and Symptoms Present marked of "Cardioresp. Arrest" OR a Provider Impression marked as "Cardiac Arrest" must have a Time of Cardiac Arrest entered.* Records with a missing or an invalid entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two-(2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

This data element is undefined if CPR was never administered. Thus, in writing computerized reports, a program should first examine the "Provider of First CPR" field, or a treatment field, to determine that CPR occurred on the run. If CPR was never rendered, the software should never examine this field.

57.

Name of Data Element:	Provider of First CPR
Priority:	Desirable
Definition:	Person who performed first CPR on patient.
Code:	Numeric entry
Field Length:	2
Field Starting and Ending Position:	369 - 370
Data Items: <div style="display: flex; justify-content: flex-start; align-items: flex-start;"> <div style="margin-right: 20px;">01</div> <div>Bystander</div> </div> <div style="display: flex; justify-content: flex-start; align-items: flex-start;"> <div style="margin-right: 20px;">02</div> <div>EMS responder</div> </div> <div style="display: flex; justify-content: flex-start; align-items: flex-start;"> <div style="margin-right: 20px;">03</div> <div>Family</div> </div> <div style="display: flex; justify-content: flex-start; align-items: flex-start;"> <div style="margin-right: 20px;">04</div> <div>Fire responder</div> </div> <div style="display: flex; justify-content: flex-start; align-items: flex-start;"> <div style="margin-right: 20px;">05</div> <div>Law Enforcement responder</div> </div> <div style="display: flex; justify-content: flex-start; align-items: flex-start;"> <div style="margin-right: 20px;">06</div> <div>None</div> </div>	

Discussion and Justification: Useful for assessing the quality of CPR rendered by initial responders to a cardio respiratory arrest, for planning public educational efforts, etc.

Business Rules: *Records submitted that require and have a Time of Cardiac Arrest marked and a Procedure OR Treatment of 'CPR' OR Time of First CPR marked **must** have a Provider of First CPR entered.* Records with missing or an invalid entry will be marked as non-compliant by the system. **Only one (1)** item from the above data item list can be submitted. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Not applicable should be used when there is no need for CPR given the condition of the patient. Unknown should only be used when data is being entered long after the actual incident and the information cannot be correctly reconstructed from the hardcopy record. For instance, unknown should never be the code if there was no CPR rendered; this should be coded as not applicable.

58.

Name of Data Element:	Time of First CPR
Priority:	Desirable
Definition:	Best <u>estimate</u> of time of first CPR.
Code:	Time format should be coded as HHMM.
Field Length:	4
Field Starting and Ending Position:	371 - 374

Content: Time format should be coded as HHMM. HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: Permits assessment of the duration of cardiopulmonary resuscitation prior to arrival of EMS responder. Useful for research purposes and for planning public education concerning CPR.

Business Rules: *Records submitted that require and have a Time of Cardiac Arrest marked AND a Procedure OR Treatment of 'CPR' OR Provider of First CPR marked **must** have a Time of First CPR entered.* Records with missing or invalid Time of First CPR entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two (2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

This data element is undefined if CPR was never administered. Thus, in writing computerized reports, a program should first examine the "Provider of First CPR" field, or a treatment field, to determine that CPR occurred on the run. If CPR was never rendered, the software should never examine this field.

59.

Name of Data Element:	Provider of First Defibrillation
Priority:	Desirable
Definition:	Person who performed first defibrillation on patient.
Code:	Numeric entry
Field Length:	2
Field Starting and Ending Position:	375 - 376
Data Items: 01 Public Access Defibrillator 02 First responder /Law Enforce./Fire AED 03 Ambulance AED 04 Ambulance Manual 88 Not Applicable	

Discussion and Justification: Provides information concerning the incidence of defibrillation of cardiac arrest patient. (For planning public and EMS Training efforts.)

Business Rules: *Records submitted with an Incident Disposition of “Treated, transported...”, ‘Care Transferred’, ‘Treated and ...’, AND a Sign and Symptoms Present marked of ‘Cardioresp. Arrest’ OR a Provider Impression marked as ‘Cardiac Arrest’ OR a Time of First Defibrillatory Shock marked **must** have a Provider of First Defibrillatory Shock entered.* Records with missing or invalid Provider of First Defibrillatory Shock entry will be marked as non-compliant by the system. **Only one (1)** item from the above data item list can be submitted. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Not applicable should be used when there was no cardiac arrest or witness of a cardiac arrest. Unknown should only be used when data is being entered long after the actual incident and the information cannot be correctly reconstructed from the hardcopy record. For instance, unknown should never be the code if there was no cardiac arrest or witness; this should be coded as not applicable.

88 *Not Applicable*

This is to be coded if the incident met the requirements for a defibrillatory shock, but none were administered. This is not to be used when there was no cardiac arrest or no patient contact.

60.

Name of Data Element:	Time of First Defibrillatory Shock
Priority:	Desirable
Definition:	<u>Estimated</u> time of first Defibrillatory shock.
Code:	Numeric entry
Field Length:	4
Field Starting and Ending Position:	377 - 380

Content: Time format should be coded as HHMM. HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: Allows assessment of the time required between onset of cardiac arrest and provision of defibrillation in instances of ventricular fibrillation. Provides information about the rapidity with which the EMS responder correctly diagnoses the rhythm and takes action.

Business Rules: *Records submitted that meet the requirement for defibrillation and have a Provider of First Defibrillatory Shock marked other than 'Not Applicable' must have a Time of First Defibrillatory Shock entered.* Records with missing or invalid Time of First Defibrillatory Shock entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two (2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

61.

Name of Data Element:	Number of Defibrillatory Shock(s)
Priority:	Desirable
Definition:	Numeric entry of the number of defibrillatory shocks given to the patient.
Code:	Numeric entry
Field Length:	2
Field Starting and Ending Position:	381 - 382
Data Items: 00 – 11 Exact numeric entry of number of shocks 12 If shocks > 11+	

Content: Numeric entry of numbers between 0-11 and 12 (represents any number greater than 11).

Discussion and Justification: Allows assessment of the number of defibrillation shocks delivered to a patient. Provides information about the number of defibrillatory shocks and the field outcome of a patient.

Business Rules: *Records submitted that meet the requirement for defibrillation and have a Provider of First Defibrillatory Shock marked other than 'Not Applicable' must have a Number of Defibrillatory Shock(s) entered.* Records with missing or invalid Number of Defibrillatory Shock(s) entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments:

62.

Name of Data Element:	Time CPR Discontinued
Priority:	Desirable
Definition:	Time at which medical control or responding EMS unit terminated resuscitation efforts (chest compressions and CPR) in the field.
Code:	Time format should be coded as HHMM.
Field Length:	4
Field Starting and Ending Position:	383 - 386

Content: Time format should be coded as HHMM. HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: Provides information concerning the duration of CPR in the field in cases in which the patient was pronounced dead in the field.

Business Rules: *Records submitted that require and have a Time of First CPR marked and a Procedure OR Treatment of 'CPR' OR Provider of First CPR marked **must** have a Time CPR Discontinued entered.* Records with missing or invalid entries will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two (2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

This data element is undefined if CPR was never administered. (see Technical Comments for "Time of First CPR")

If CPR continued into hospital then this time should match the arrival time at facility.

63.

Name of Data Element:	Time Spontaneous Circulation Returned
Priority:	Desirable
Definition:	Estimated time of restored palpable pulse following resuscitation in the field.
Code:	Numeric entry
Field Length:	4
Field Starting and Ending Position:	387 - 390

Content: Time format should be coded as HHMM. HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: If there was a return of spontaneous circulation while in the care of the providers then the providers should enter an appropriate time in this field.

Business Rules: A time should only be entered if return of circulation occurs and Time of Cardiac Arrest is marked. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two-(2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

64.

Name of Data Element:	Injury Indicators		
Priority:	Essential		
Definition:	Provides indication of injuries from a collision.		
Code:	Numeric entry.		
Field Length:	6		
Field Starting and Ending Position:	391 - 396		
Data Items:			
01	Speed 40+ MPH	07	Death Same MV
02	Extrication > 15 Minutes	08	Motorcycle 20+MPH
03	Deformity 20+ inches	09	Pedestrian vs. MV > 5 MPH
04	Intrusion 12+ inches	10	Falls > 20 feet
05	Rollover	88	Not Applicable
06	Ejection		

Content: This data element is coded as a 2-position field that provides risk factor predictors present at the incident. Up to 3 Injury Indicators can be selected.

Business Rules: *Records submitted with an Incident Disposition of 'Treated, transported...' or 'Care Transferred' AND ONLY have an Incident Type marked as 'Trauma' and a 'Mechanism of Injury' involving a motor vehicle **must** have an Injury Indicator entered.* Records with missing or an invalid entry will be marked as non-compliant by the system. Other appropriate incidents that involve patient contact may also submit this data element as appropriate. **Up to three (3)** items from the above data item list can be submitted. Left justify with submission(s) and back fill with appropriate spaces to meet field length. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments:

88 *Not Applicable*

This code should be used when the data element 'Mechanism of Injury' is related to a Motor Vehicle but no Injury Indicators applied. This is not to be used if the field is not appropriate for the incident.

65.

Name of Data Element:	Position in Vehicle
Priority:	Essential
Definition:	Position in vehicle during collision.
Code:	Numeric entry.
Field Length:	2
Field Starting and Ending Position:	397 - 398
Data Items: <div style="display: flex; justify-content: flex-end; padding-right: 20px;"> <div style="text-align: right; padding-right: 10px;">01</div> <div>Driver</div> </div> <div style="display: flex; justify-content: flex-end; padding-right: 20px;"> <div style="text-align: right; padding-right: 10px;">02</div> <div>Front Seat Passenger</div> </div> <div style="display: flex; justify-content: flex-end; padding-right: 20px;"> <div style="text-align: right; padding-right: 10px;">03</div> <div>Second Row Passenger</div> </div> <div style="display: flex; justify-content: flex-end; padding-right: 20px;"> <div style="text-align: right; padding-right: 10px;">04</div> <div>Third Row Passenger</div> </div> <div style="display: flex; justify-content: flex-end; padding-right: 20px;"> <div style="text-align: right; padding-right: 10px;">05</div> <div>Other Row Passenger</div> </div> <div style="display: flex; justify-content: flex-end; padding-right: 20px;"> <div style="text-align: right; padding-right: 10px;">06</div> <div>Cargo/Truck Bed</div> </div> <div style="display: flex; justify-content: flex-end; padding-right: 20px;"> <div style="text-align: right; padding-right: 10px;">88</div> <div>Not Applicable</div> </div>	

Content: This data element is coded as a 2-position field that provides information about the position of the patient during a Motor Vehicle Impact. It can be used to predict injury patterns in association with other data elements.

Business Rules: *Records submitted with an Incident Disposition of 'Treated, transported...' or 'Care Transferred' AND ONLY have an Incident Type marked as 'Trauma' and a 'Mechanism of Injury' involving a motor vehicle **must** have a Position in Vehicle entered.* Records with missing or an invalid entry will be marked as non-compliant by the system. **Only one (1)** item from the above data item list can be submitted. Other appropriate incidents that involve patient contact may also submit this data element as appropriate. Left justify with submission(s) and back fill with appropriate spaces to meet field length. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments:

88 *Not Applicable*

This code should be used when the data element 'Mechanism of Injury' is related to a Motor Vehicle but no Position in Vehicle applies. This is not to be used if the field is not appropriate for the incident.

66.

Name of Data Element:	Alcohol / Drug Use
Priority:	Essential
Definition:	Suspected alcohol or drug use by patient.
Code:	Numeric entry.
Field Length:	2
Field Starting and Ending Position:	399 - 400
Data Items: <div style="margin-left: 400px;"> 01 Alcohol 02 Drugs 03 Alcohol/Drugs 04 No </div>	

Discussion and Justification: Important data element for injury research, permitting reports of value to public health researchers and policy makers.

Business Rules: *Records submitted with an Incident Disposition of “Treated, transported...”, “Care Transferred”, “Treat, transported... vehicle”, “Treated and ...”, “Patient refused...” must have an Alcohol / Drug use entered.* Records with missing or invalid Alcohol / Drug Use entry will be marked as non-compliant by the system. **Only one (1)** item from the above data item list can be submitted. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Should be coded as yes whenever the EMS responder suspect’s alcohol or drug use by the patient may have contributed to the incident. The uses of drugs or alcohol in isolation have been coded individually for epidemiological purposes and specific use should be coded appropriately when possible. Not applicable should be used when there is no patient, such as in a standby response. If alcohol or drugs are totally unrelated to the incident, this field should be coded as no.

67.

Name of Data Element:	Initial Vital Signs Time
Priority:	Essential
Definition:	Time that initial vital signs were obtained
Code:	Time format should be coded as HHMM.
Field Length:	4
Field Starting and Ending Position:	401 - 404

Content: HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: Desirable in certain situations in which there may be a significant delay between the time at which a response unit arrives at the scene and the time at which the personnel can access the patient. For example, if the EMTs are prevented because of fire or adverse conditions from approaching the patient, this time will be useful. Search and rescue operations will also note delays between arrival at the overall scene and the actual patient contact.

Business Rules: If Records submitted with an Incident Disposition of “Treated, transported...”, ‘Care Transferred’, ‘Treat, transported...’, ‘Treated and ...’, ‘Patient refused...’ **must** have an **Initial Vital Signs Time**. Records with a missing or an invalid entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two-(2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

68.

Name of Data Element:	Initial Pulse Rate
Priority:	Essential
Definition:	Patient's palpated or auscultated pulse rate expressed in number per minute.
Code:	Numeric entry
Field Length:	3
Field Starting and Ending Position:	405 - 407
Data Items: {Pulse rate} – Max entry 300 888 Not Obtained	

Content: Code as three (3) -digit field.

Discussion and Justification: The pulse rate is a component of various triage-scoring systems, and permits a rough assessment of the severity of illness of the patient. This data element is based on the physical examination of the patient, and the pulse must be palpated or auscultated. An electrical rhythm is not sufficient, as the patient could have pulse less electrical activity (PEA). In this instance, the correct value of this data element is '000'.

Business Rules: *Records submitted with an Incident Disposition of “Treated, transported...”, “Care Transferred”, “Treat, transported...”, “Treated and ...”, “Patient refused...” must have an Initial Pulse entered.* An entered pulse rate should not be entered greater than 300. Records with a missing or an invalid entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Pulse rates should be left justified filled with zeros (i.e. 60 = 060). It is recognized that patient's encountered may have an initial pulse rate greater than 300, however, planning and epidemiological studies do not need to differentiate individual numbers greater than the maximum setting. This should limit the submission of, as well as flag erroneous data.

888 *Not Obtained*

This is to be coded if a patient was encountered and no pulse was assessed. It is not to be used if no patient was encountered or the incident does not require a pulse rate.

69.

Name of Data Element:	Initial Respiratory Rate
Priority:	Essential
Definition:	Unassisted patient respiratory rate expressed as number per minute.
Code:	Numeric entry
Field Length:	3
Field Starting and Ending Position:	408 - 410
Data Items: { Respiratory rate } - Limit 100 888 Not Obtained	

Content: Coded as three (3)-digit field.

Discussion and Justification: Component of several triage scoring systems and provides some assessment of severity of illness or injury. If a patient is not breathing and requires artificial ventilation, this data element should be coded as '000'.

Business Rules: *Records submitted with an Incident Disposition of “Treated, transported...”, ‘Care Transferred’, ‘Treat, transported... vehicle’, ‘Treated and ...’, ‘Patient refused...’ must have an Initial Respiratory Rate entered.* An entered respiratory rate should not be entered greater than 100. Records with a missing or an invalid entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Respiratory rates should be left justified filled with zeros (i.e. 20 = 020). It is recognized that patient’s encountered may have an initial respiratory rate greater than 100, however, planning and epidemiological studies do not need to differentiate individual numbers greater than the maximum setting. This should limit the submission of, as well as flag erroneous data.

888 *Not Obtained*

This is to be coded if a patient was encountered and no respiratory rate was assessed. It is not to be used if no patient was encountered or the incident does not require a respiratory rate.

70.

Name of Data Element:	Initial Systolic Blood Pressure
Priority:	Essential
Definition:	Patient's systolic blood pressure
Code:	Numeric entry
Field Length:	3
Field Starting and Ending Position:	411 - 413
Data Items: {Systolic blood pressure} – Limit 400 888 Not Obtained	

Content: Coded as three (3)-digit field.

Discussion and Justification: Important component of several scoring systems for triage, and permits some assessment of acuity of patient.

Business Rules: *Records submitted with an Incident Disposition of “Treated, transported...”, ‘Care Transferred’, ‘Treat, transported... vehicle’, ‘Treated and ...’, ‘Patient refused...’ must have an Initial Systolic Blood Pressure entered. An entered systolic blood pressure should not be greater than 400. Records with missing or invalid systolic blood pressure entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.*

Technical Comments: Systolic blood pressures should be left justified filled with zeros (i.e. 60 = 060). The coding of ‘000’ should only be used if a blood pressure is attempted but not able to be determined due to poor perfusion. It is recognized that patient’s encountered may have an initial systolic blood pressures greater than 400, however, planning and epidemiological studies do not need to differentiate individual number greater than the maximum setting. This should limit the submission of, as well as flag erroneous data.

888 *Not Obtained*

This is to be coded if a patient was encountered and no systolic blood pressure was assessed. It is not to be used if no patient was encountered or the incident does not require a systolic blood pressure.

71.

Name of Data Element:	Initial Diastolic Blood Pressure
Priority:	Essential
Definition:	Patient's diastolic blood pressure
Code:	Numeric entry
Field Length:	3
Field Starting and Ending Position:	414 - 416
Data Items: {Diastolic blood pressure} – Limit 400 888 Not Obtained	

Content: Coded as three (3)-digit field.

Discussion and Justification: Important component of several scoring systems for triage, and permits some assessment of acuity of patient.

Business Rules: *Records submitted with an Incident Disposition of “Treated, transported...”, “Care Transferred”, “Treat, transported... vehicle”, “Treated and ...”, “Patient refused...” must have an Initial Diastolic Blood Pressure entered.* An entered diastolic blood pressure should not be entered greater than 400. Records with missing or invalid diastolic blood pressure entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Diastolic blood pressures should be left justified filled with zeros (i.e. 60 = 060). The coding of ‘000’ should only be used if a blood pressure is attempted but not able to be determined due to poor perfusion. It is recognized that patient’s encountered may have an initial diastolic blood pressures greater than 400, however, planning and epidemiological studies do not need to differentiate individual number greater than the maximum setting. This should limit submission of, as well as flag erroneous data.

888 *Not Obtained*

This is to be coded if a patient was encountered and no diastolic blood pressure was assessed. It is not to be used if no patient was encountered or the incident does not require a diastolic blood pressure.

72.

Name of Data Element:	Initial Blood Pressure Method
Priority:	Essential
Definition:	Patient's palpated diastolic blood pressure
Code:	Numeric entry
Field Length:	1
Field Starting and Ending Position:	417 - 417
Data Items: <div style="display: flex; justify-content: space-between; padding: 0 20px;"> <div>0</div> <div>Auscultated</div> </div> <div style="display: flex; justify-content: space-between; padding: 0 20px;"> <div>1</div> <div>Palpated</div> </div> <div style="display: flex; justify-content: space-between; padding: 0 20px;"> <div>2</div> <div>NIBP Machine</div> </div> <div style="display: flex; justify-content: space-between; padding: 0 20px;"> <div>3</div> <div>Invasive Monitoring</div> </div>	

Content: Coded as a one (1)-digit field.

Discussion and Justification: Important component of several scoring systems for triage, and permits some assessment of acuity of patient.

Business Rules: *Records submitted that require a Diastolic Blood Pressure and have a value other than '888' must have an Initial Blood Pressure Method entered.* Records with missing or invalid blood pressure method entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

0 *Auscultated*

This is coded when a diastolic blood pressure field is completed and the value was obtained via auscultation means.

1 *Palpate*

This is coded when a systolic blood pressure field was obtained via palpation, thus preventing the interpretation of a diastolic blood pressure.

2 *Non-Invasive Blood Pressure Machine (NIBP)*

This is coded when a diastolic blood pressure field is completed and the value was obtained via an external electronic device (Dynamap, Propaq, etc.)

3 *Invasive Monitoring*

This is coded when a diastolic blood pressure field is completed and the value was obtained via an internal line such as an arterial (radial, umbilical, LA, etc).

73.

Name of Data Element:	Initial Skin Perfusion						
Priority:	Essential						
Definition:	Patient skin perfusion expressed as normal or decreased.						
Code:	Numeric entry						
Field Length:	2						
Field Starting and Ending Position:	418 - 419						
Data Items:	<table> <tr> <td>01</td><td>Normal</td></tr> <tr> <td>02</td><td>Decreased</td></tr> <tr> <td>88</td><td>Not Obtained</td></tr> </table>	01	Normal	02	Decreased	88	Not Obtained
01	Normal						
02	Decreased						
88	Not Obtained						

Content: This data element is coded as a two (2)-position field. Normal is defined as warm, pink and with capillary refill time of two (2) or less seconds. Decreased is defined as cool, pale, mottled, dusky and with capillary refill time of greater than two (2) seconds.

Business Rules: *Records submitted with an Incident Disposition of “Treated, transported...”, “Care Transferred”, “Treat, transported... vehicle”, “Treated and ...”, “Patient refused...” must have an Initial Skin Perfusion entered. Only one (1) item from the above data item list can be submitted. Records with a missing or an invalid entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.*

Technical Comments:

88 *Not Obtained*

This is to be coded if a patient was encountered and no skin perfusion was assessed. It is not to be used if no patient was encountered or the incident does not require a skin perfusion assessment.

74.

Name of Data Element:	Initial Glasgow Eye Opening Component
Priority:	Essential
Definition:	Patient's eye opening component of the Glasgow coma scale.
Code:	Numeric entry
Field Length:	2
Field Starting and Ending Position:	420 - 421
Data Items: 01 None 02 Opens eyes in response to painful stimulation 03 Opens eyes in response to verbal stimulation 04 Opens eyes spontaneously 88 Not obtained	

Discussion and Justification: One of three components of the Glasgow Coma Scale (GCS), which is widely used to assess neurological status. The score and its components are also parts of a variety of triage scoring systems. The component by itself does not offer a true assessment of neurological status; therefore a complete GCS examination assessing all three components must be submitted for neurological evaluation purposes.

Business Rules: *Records submitted with an Incident Disposition of "Treated, transported..." , 'Care Transferred', 'Treat, transported... vehicle', 'Treated and ...', 'Patient refused...' must have a complete GCS examination entered. Only one (1) item from the above data item list can be submitted. Records with a missing or an invalid entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.*

Technical Comments: A judgment that the data element is not applicable should not be made at the responder level. Instead, this can be made by generating data reports for specific conditions in which the data element is considered relevant, and examining the field for valid values.

88 *Not Obtained*

This is to be coded if a patient was encountered and GCS was not assessed. It is not to be used if no patient was encountered or the incident does not require a skin perfusion assessment.

75.

Name of Data Element:	Initial Glasgow Verbal Component
Priority:	Essential
Definition:	Patient's verbal component of the Glasgow coma scale
Code:	Numeric entry
Field Length:	2
Field Starting and Ending Position:	422 - 423
<p>Data Items:</p> <p>For patients >5years:</p> <p>01 None</p> <p>02 Non-specific sounds</p> <p>03 Inappropriate words</p> <p>04 Confused conversation or speech</p> <p>05 Oriented and appropriate speech</p> <p>For patients 2-5 years:</p> <p>01 None</p> <p>02 Grunts</p> <p>03 Cries and/or screams</p> <p>04 Inappropriate words</p> <p>05 Appropriate words</p> <p>For patients 0-23 months:</p> <p>01 None</p> <p>02 Persistent cry, grunting</p> <p>03 Inappropriate cry</p> <p>04 Cries, inconsolable</p> <p>05 Smiles, coos, cries appropriately</p> <p>88 Not Obtained</p>	

Discussion and Justification: One of three components of the Glasgow Coma Scale, which is widely used to assess neurological status. The score and its components are also parts of a variety of triage scoring systems. The component by itself does not offer a true assessment of neurological status; therefore a complete GCS examination assessing all three components must be submitted for neurological evaluation purposes.

Business Rules: *Records submitted with an Incident Disposition of “Treated, transported...”, “Care Transferred”, “Treat, transported... vehicle”, “Treated and ...”, “Patient refused...” must have a complete GCS examination entered. Only one (1) item from the above data item list can be submitted. Records with a missing or an invalid entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.*

Technical Comments: If the patient is intubated and deeply comatose, then this data element is coded as 1 for none, since there was no verbal response at the time of Intubation. However, if the patient is intubated but not deeply comatose, and there is a possibility of verbal response, it is difficult to apply the Glasgow coma scale. The EMS responder can ask questions and if the patient can nod his head or blink eyes, etc. appropriately, then this element is coded as 5. A judgment that the data element is not applicable should not be made at the responder level. Instead, this can be made by generating data reports for specific conditions in which the data element is considered relevant, and examining the field for valid values.

88 *Not Obtained*

This is to be coded if a patient was encountered and GCS was not assessed. It is not to be used if no patient was encountered or the incident does not require a skin perfusion assessment.

76.

Name of Data Element:	Initial Glasgow Motor Component																										
Priority:	Essential																										
Definition:	Patient's motor component of the Glasgow coma scale.																										
Code:	Numeric entry																										
Field Length:	2																										
Field Starting and Ending Position:	424 - 425																										
<p>Data Items:</p> <p>For patients >5 years:</p> <table> <tr><td>01</td><td>None</td></tr> <tr><td>02</td><td>Extensor posturing in response to painful stimulation</td></tr> <tr><td>03</td><td>Flexor posturing in response to painful stimulation</td></tr> <tr><td>04</td><td>General withdrawal in response to painful stimulation</td></tr> <tr><td>05</td><td>Localization of painful stimulation</td></tr> <tr><td>06</td><td>Obeys commands with appropriate motor response</td></tr> </table> <p>For patients up to 5 years:</p> <table> <tr><td>01</td><td>None</td></tr> <tr><td>02</td><td>Extensor posturing in response to painful stimulation</td></tr> <tr><td>03</td><td>Flexor posturing in response to painful stimulation</td></tr> <tr><td>04</td><td>General withdrawal in response to painful stimulation</td></tr> <tr><td>05</td><td>Localization of painful stimulation</td></tr> <tr><td>06</td><td>Spontaneous</td></tr> <tr><td>88</td><td>Not Obtained</td></tr> </table>		01	None	02	Extensor posturing in response to painful stimulation	03	Flexor posturing in response to painful stimulation	04	General withdrawal in response to painful stimulation	05	Localization of painful stimulation	06	Obeys commands with appropriate motor response	01	None	02	Extensor posturing in response to painful stimulation	03	Flexor posturing in response to painful stimulation	04	General withdrawal in response to painful stimulation	05	Localization of painful stimulation	06	Spontaneous	88	Not Obtained
01	None																										
02	Extensor posturing in response to painful stimulation																										
03	Flexor posturing in response to painful stimulation																										
04	General withdrawal in response to painful stimulation																										
05	Localization of painful stimulation																										
06	Obeys commands with appropriate motor response																										
01	None																										
02	Extensor posturing in response to painful stimulation																										
03	Flexor posturing in response to painful stimulation																										
04	General withdrawal in response to painful stimulation																										
05	Localization of painful stimulation																										
06	Spontaneous																										
88	Not Obtained																										

Discussion and Justification: One of three components of the Glasgow Coma Scale, which is widely used to assess neurological status. The score and its components are also parts of a variety of triage scoring systems. The component by itself does not offer a true assessment of neurological status; therefore a complete GCS examination assessing all three components must be submitted for neurological evaluation purposes.

Business Rules: Records submitted with an Incident Disposition of "Treated, transported...", "Care Transferred", "Treat, transported... vehicle", "Treated and ...", "Patient refused..." **must** have a complete GCS examination entered. **Only one (1)** item from the above data item list can be submitted. Records with a missing or an invalid entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: This component cannot be assessed if the patient has received a muscle relaxant. However, information on patient's response prior to the muscle relaxant may be reported for this initial assessment. A judgment that the data element is not applicable should not be made at the responder level. Instead, this can be made by generating data reports for specific conditions in which the data element is considered relevant, and examining the field for valid values.

88 *Not Obtained*

This is to be coded if a patient was encountered and GCS was not assessed. It is not to be used if no patient was encountered or the incident does not require a skin perfusion assessment.

77.

Name of Data Element:	Initial Revised Trauma Score
Priority:	Desirable
Definition:	Patient's revised trauma score.
Code:	Numeric entry
Field Length:	2
Field Starting and Ending Position:	426 - 427

Content: Coded as two (2)-digit field.

Discussion and Justification: One example of a triage scoring system, which may be used to categorize injured patients in an EMS system. This data element is considered desirable, but the intention is that local agencies use scoring systems, which are applicable to their own purposes. Most of these scoring systems should be calculable from other data elements, which are included as core elements of the uniform data set.

Other scoring systems that are used in EMS information systems include the CRAMS, the Trauma Index, the Trauma Score (Champion), the Glasgow Coma Scale, APACHE, PRISM, Hanover Intensive Score (HIS), AIS and ISS. It is recommended that experience be gained with these scoring systems, emphasizing scoring systems, which can be automatically calculated from components, which are designated as core data elements.

Business Rules: *Records submitted with an Incident Disposition of "Treated, transported..." , 'Care Transferred' AND have an Incident Type marked as 'Trauma' **must** have an Initial Revised Trauma Score entered.* Records with a missing or an invalid entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: The revised trauma score may be calculated from other data elements. It is the sum of a respiratory rate component, systolic blood pressure component, and a neurologic component.

Respiratory Rate Component

4	10 - 29 per minute
3	>29 per minute
2	6 - 9 per minute
1	1 - 5 per minute
0	None spontaneous

Systolic Blood Pressure Component

4	>89 mm Hg
3	76 - 89 mm Hg
2	50 - 75 mm Hg
1	1 - 49 mm Hg
0	No pulse

Neurologic Component

4	Glasgow coma score 13 - 15
3	Glasgow coma score 9 - 12
2	Glasgow coma score 6 - 8
1	Glasgow coma score 4 - 5
0	Glasgow coma score 3

Calculate the total score by adding the 3 fields together. If the score cannot be calculated because of an absent component data or is unknown, then the score should be coded as '88'.

88 *Not Obtained*

This is to be coded if a patient was encountered and not all components were presented to properly formulate a score. It is not to be used if no patient was encountered or the incident does not require revised trauma score.

78.

Name of Data Element:	Initial Cardiac Rhythm Time
Priority:	Essential
Definition:	Time that initial cardiac rhythm was obtained
Code:	Time format should be coded as HHMM
Field Length:	4
Field Starting and Ending Position:	428 - 431

Content: HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: Desirable in certain situations in which there may be a significant delay between the time at which a response unit arrives at the scene and the time at which the personnel can access the patient with cardiac monitoring equipment. For example, if the care providers are delayed from initial patient contact and assessment until applying a cardiac monitor to the patient, this time will be useful. Search and rescue operations will also note delays between the actual patient contact and evaluation of cardiac rhythm.

Business Rules: *Records submitted with an Incident Disposition of “Treated, transported...” and an Initial Cardiac Rhythm must have an Initial Cardiac Rhythm Time entered.* If the incident or level of care is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two-(2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

79.

Name of Data Element:	Initial Cardiac Rhythm		
Priority:	Essential		
Definition:	Initial monitored cardiac rhythm as interpreted by EMS personnel.		
Code:	Numeric entry		
Field Length:	2		
Field Starting and Ending Position:	432 - 433		
Data Items:			
01	Normal Sinus	10	Paced
02	Sinus Tach.	11	PVC's
03	Sinus Brady	12	SV. Tach.
04	Asystole	13	Vent. Tach
05	AV Block	14	Vent. Fib.
06	Atrial Fib.	15	AED Shockable
07	Atrial Flutter	16	AED Non-Shockable
08	PEA / EMD	77	Other
09	Junctional	88	Not Applicable

Discussion and Justification: Provides the initial monitored rhythm, permitting reports generated according to initial rhythm. Such reports would be of use in assessing the survival rate after certain rhythms.

It is understood that some agencies collect data about cardiac rhythms with more detail than this list. For instance, many agencies expect EMS personnel to distinguish first, second, and third degree heart block. There is no intention to restrict the manner in which any agencies decide to code cardiac rhythms, but there is a necessity to be able to collapse those rhythms to a common definition, which can then be combined. For the examples of heart block mentioned, those would all collapse into AV Block.

Business Rules: *Records submitted with an Incident Disposition of "Treated, transported...", 'Care Transferred', 'Treat, transported... vehicle', 'Treated and ...', 'Patient refused...' and has a Nature of Incident marked as 'ALS' or 'Critical Care' must have an Initial Cardiac Rhythm. Only one (1) item from the above data item list can be submitted. Records with an invalid entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.*

Technical Comments: This field should be coded with the appropriate number of spaces when the EMS responder is not an appropriate level provider to assess electrical rhythm, or if electrical monitoring is unavailable to the provider.

80.

Name of Data Element:	Final Cardiac Rhythm Time
Priority:	Essential
Definition:	Time that the final cardiac rhythm was obtained
Code:	Time format should be coded as HHMM
Field Length:	4
Field Starting and Ending Position:	434 - 437

Content: HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: Assists in the evaluation of patient condition and response to overall treatments based on other collected times. Provides defined time frame for cardiac rhythm assessment by researchers and educators.

Business Rules: *Records submitted with an Incident Disposition of “Treated, transported...” and a Final Cardiac Rhythm **must** have a Final Cardiac Rhythm Time entered.* If the incident or level of care is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two-(2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

81.

01.

Name of Data Element:	Final Cardiac Rhythm (at Destination)		
Priority:	Desirable		
Definition:	Monitored cardiac rhythm upon arrival at destination.		
Code:	Numeric entry		
Field Length:	2		
Field Starting and Ending Position:	438 - 439		
Data Items:			
01	Normal Sinus	10	Paced
02	Sinus Tach.	11	PVC's
03	Sinus Brady	12	SV. Tach.
04	Asystole	13	Vent. Tach
05	AV Block	14	Vent. Fib.
06	Atrial Fib.	15	AED Shockable
07	Atrial Flutter	16	AED Non-Shockable
08	PEA / EMD	77	Other
09	Junctional	88	Not Applicable

Discussion and Justification: Captures the electrical rhythm at the time of arrival at a destination, as previously defined. Reports could examine whether this rhythm differs from the initial rhythm of the patient when encountered in the field, whether there was improvement or deterioration, etc. If an EMS responder is not equipped with electrical monitoring capability or is not of an appropriate level to assess rhythm, this field should be coded as not applicable.

Business Rules: *Records submitted with an Incident Disposition of "Treated, transported..." and has a Nature of Incident marked as 'ALS' or 'Critical Care' must have a Final Cardiac Rhythm. Only one (1) item from the above data item list can be submitted. Records with an invalid entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.*

82.

02.

Name of Data Element:	Procedure or Treatment Name		
Priority:	Essential		
Definition:	Identification of crewmember position and the procedure they attempted or performed on patient.		
Code:	Numeric entry		
Field Length:	60		
Field Starting and Ending Position:	440 - 499		
Data Items:			
01	Abdominal Thrusts	24	Irrigation
02	Auto Defib.	25	IV Central Vein
03	Back Blows	26	IV Intraosseous
04	Bag Valve Mask	27	IV Peripheral
05	Bandage	28	MAST Applied
06	Bleeding Controlled	29	MAST Inflated
07	Blood Draw	30	Nasopharyngeal airway
08	Blood Glucose Level Check	31	Needle Thorac.
09	Blood product administration	32	NG Tube
10	Burn Care	33	Oropharyngeal airway
11	Cardiovert	34	Oxygen Administered
12	Cervical Collar	35	Pacing
13	Cold Pack	36	Pocket Mask
14	CPR	37	Splint - Extremity
15	Defib - manual	38	Splint - Traction
16	Delivery (OB)	39	Suctioning
17	Demand Valve	40	Surgical Airway
18	EKG	41	Tourniquet
19	Extrication	42	Urinary Cath.
20	Full Spinal Immobilization	43	Ventilator
21	Intubation - multi-lumen airway	77	Other
22	Intubation Nasotracheal	888	Not Applicable*
23	Intubation Orotracheal		

Discussion and Justification: Intended to provide planners and educators with information about which procedures are conducted in the field, by whom, and for what indications. Procedures are defined here as anything done by way of assessment or treatment of the patient. Thus, application of a cervical collar is a treatment, use of a cardiac monitor is a tool of assessment, and drawing blood tubes is neither a specific treatment nor a means of field assessment. All of these would be considered procedures for purposes of this data element.

The North Dakota State Office of EMS derived this list to track recognized procedures and treatments occurring in the field. Agencies should identify other procedures not listed as 'Other'.

Business Rules: *Records submitted with an Incident Disposition of "Treated, transported...", "Care Transferred", "Treat, transported... vehicle", "Treated and ..." may have a Procedure or Treatment Name entered. Up to twenty (20) items from the above data item list with the crewmember position code may be submitted. Left justify with submission(s) and back fill with appropriate spaces to meet field length. Records with an invalid entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.*

Technical Comments: This field is coded with the position of the crewmember, as identified in data elements 14 – 20, performing the procedure followed by the above data item code. For example the coding for crewmember 2 performing 'Assisted ventilation' and crewmember 1 performing 'Cardiopulmonary resuscitation' would be "201104".

77 *Other*

This is to be coded when a crewmember does a procedure not listed in the data item list.

888 *Not Applicable*

This is to be coded if a patient was encountered and did not receive any procedures or treatment. This is not to be used if no patient was encountered or the incident does not require entry of a procedure or treatment. When used this should be the only code submitted in the field.

*Note that Not Applicable is three (3) digits and does not require a crewmember position in front of the code.

83.

Name of Data Element:	Level of Care Provided (Nature of Incident)
Priority:	Mandatory
Definition:	Type of care available/rendered by personnel regardless of level
Code:	Numeric entry.
Field Length:	2
Field Starting and Ending Position:	500 - 501
Data Items 01 BLS 02 ALS 03 Specialty Care	

Content: This data element is coded as a two (2)-position field that provides important information about level of care rendered.

Business Rules: *All records submitted must have a Level of Care Provided entered.* Records with a missing or an invalid entry will be rejected and marked as non-compliant by the system.

Technical Comments:

01 *BLS*

Is a level of care that provides treatment and transport requiring only minimal intervention. It includes the administration of oxygen and patient assisted medications as noted in the Department of Transportation Basic Curriculum.

02 *ALS*

Is a level of care that is able to provide advanced monitoring of patient (ECG, 12 Lead, etc.), invasive procedures that include IV therapy, IO therapy, advanced airway management, ACLS, and pharmacology intervention. This level encompasses ILS care.

03 *Specialty Care*

Is a level of specialty care patient transportation when medically necessary, for a critically ill or injured patient needing critical care between medical care facilities.

84.

Name of Data Element:	Medication Name
Priority:	Desirable
Definition:	Medication name.
Code:	Numeric entry.
Field Length:	56
Field Starting and Ending Position:	502 - 557
Data Items: Please refer to Appendix D for Medications List	

Discussion and Justification: Intended to provide planners and educators with information about which drugs are administered in the field, by whom, and for what indications. It is likely that each responder agency will have its own list of drugs, which are carried by the response vehicles, and this list should be used for the data collection efforts of that agency. The North Dakota Department of Health, Division of EMS derived this list to track recognized the current state approved list of medications being used in the field. It is not expected that every agency will permit its providers to use or carry all these drugs. Agencies that administer medications not listed should mark those as ‘Other’.

Business Rules: *Records submitted with an Incident Disposition of “Treated, transported...” , ‘Care Transferred’, ‘Treat, transported... vehicle’, ‘Treated and ...’ may have a Medication Name entered.*

Up to fifteen (7) items from the above data item list with the crewmember position code and time administered may be submitted. Left justify with submission(s) and back fill with appropriate spaces to meet field length. Records with an invalid entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: This field is coded with the position of the crewmember, as identified in data elements #13 – 20, performing the procedure followed by the above data item code, followed by the time administered in HH:MM format with the colon. Refer to elements #21 – 28 for coding information on times and acceptable ranges.

For example the coding for crewmember 3 administering ‘Atropine’ at 23:02 and crewmember 1 administering ‘Epinephrine’ at 23:05 would be “31023:0212123:05”.

77 *Other*

This is to be coded for the medication when a crewmember administers a medication not listed in the data item list. Follow the same format listed above.

888 *Not Applicable*

This is to be coded if a patient was encountered and received no medications. This is not to be used if no patient was encountered or the incident does not require entry of a procedure or treatment. When used this should be the only code submitted in the field.

*Note that Not Applicable is three (3) digits and does not require a crewmember position in front of the code.

85.

Name of Data Element:	Destination Type		
Priority:	Essential		
Definition:	Health Care Facility or Prehospital Unit/Home that received patient from EMS responder providing this record.		
Code:	Numeric entry.		
Field Length:	2		
Field Starting and Ending Position:	558 - 559		
Data Items:			
01	Home	06	Hospital
02	Police/jail	07	Morgue
03	Medical Office/clinic	08	Extended Care
04	Other EMS responder (ground)	77	Other
05	Other EMS responder (air)	88	Not applicable

Discussion and Justification: Allows reporting by destination facilities, and allows linking when a patient is transferred between EMS responder agencies. Not applicable would be selected when there is no patient.

It is anticipated that each region or state will codify its list of hospitals in an internally consistent manner, permitting reports by facility. For purposes of the uniform data set, the first 8 categories have been defined above. For purposes of export to a larger data set, such as a national data set, all hospital destinations would be collapsed down into a single code for Hospital.

This data element is very valuable for probabilistic linkage. For instance, when an EMS responder indicates a specific hospital identifier, this can greatly facilitate linkage to outpatient and inpatient facility records.

Business Rules: *Records submitted with an Incident Disposition of “Treated, transported...” or ‘Care Transferred’ must have a Destination Type entered.* Records with a missing or an invalid Destination Type will be marked as non-compliant by the system. Only one (1) item from the above data item list can be submitted. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

86.

Name of Data Element:	Destination Determination		
Priority:	Essential		
Definition:	Reason a transport destination was selected.		
Code:	Numeric entry.		
Field Length:	2		
Field Starting and Ending Position:	560 - 561		
Data Items:			
01	Closest Facility	06	Protocol
02	Patient/Family Choice	07	Trauma Center
03	Patient Physician Choice	08	On-line Medical Direction
04	Managed Care	09	Diversion
05	Law Enforcement Choice	10	EMS Provider Choice

Discussion and Justification: Helps EMS managers to determine whether the choice of destination is appropriate. Items, which are defined as patient, physician, or family choice, are of interest to determine whether a trauma or referral system is functioning well, or is frequently overridden by non-medical issues.

Business Rules: *Records submitted with an Incident Disposition of “Treated, transported...” or ‘Care Transferred’ must have a Destination Determination entered.* Records with a missing or an invalid entry will be marked as non-compliant by the system. **Only one (1)** item from the above data item list can be submitted. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

87.

Name of Data Element:	Prior Aid		
Priority:	Essential		
Definition:	The type of individual who performed any care prior to the arrival of this unit.		
Code:	Numeric entry		
Field Length:	6		
Field Starting and Ending Position:	562 - 567		
Data Items:			
01	None	11	Rescue Squad
02	Bystander	12	Doctor’s Office/Clinic
03	Family	13	Hospital
04	Patient	14	Nursing Home
05	Ambulance Service	15	Other Medical Facility
06	Quick Response Unit	16	Law Enforcement
07	Fixed Wing Service	77	Other
08	Helicopter Service	88	Not Applicable
09	Fire Dept.	99	Unknown
10	Rescue Squad		

Discussion and Justification: Beneficial to planners and researchers in evaluating the skills and abilities of those first to arrive on the scene or witness emerging situations where medical or injuries are paramount.

Business Rules: *All Records submitted **must** have a Prior Aid entry.* **Up to three (3)** items from the above data item list can be submitted. Records with an invalid entry will be marked as non-compliant by the system.

Technical Comments:

77 *Other*

This is to be coded when an individual not listed in the data item list provided the prior aid.

88 *Not Applicable*

This is to be coded if the incident would not receive any prior assistance or aid, such as a standby.

99 *Unknown*

This is to be coded if prior aid was rendered but the report writer is unsure what affiliation the aid came from.

88.

Name of Data Element:	Receiving Agency
Priority:	Essential
Definition:	Specific Health Care Facility or Prehospital Agency that received patient from EMS provider providing this record.
Code:	Numeric entry.
Field Length:	4
Field Starting and Ending Position:	568 - 571
Data Items <div style="display: flex; justify-content: space-between;"> { 4 digit Health Facility Number } Refer to Appendix B </div> <div style="display: flex; justify-content: space-between;"> { 4 digit EMS Agency Number } Refer to Appendix A </div> <div style="text-align: center; margin-top: 10px;"> 9999 Unknown </div>	

Content: This element consists of the unique 4-digit number as assigned by the North Dakota Department of Health, Division of EMS for approved health care facilities and EMS agencies.

Business Rules: *Records submitted with an Incident Disposition of “Treated, transported...” , ‘Care Transferred’ must have a Receiving Agency entered.* Records with a missing or invalid entry will be rejected and marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: This data element is used in conjunction with data elements “Destination/Transferred To” to indicate the specific receiving facility.

9999 *Unknown*

This code should be used when the specific facility number or EMS agency number is not known.

89.

Name of Data Element:	Research 1
Priority:	Desirable
Definition:	This is an additional field that is not defined by the State and allows local or regional authorities to collect random data not defined in this data set.
Code:	Alpha/numeric entry.
Field Length:	4
Field Starting and Ending Position:	572 - 575

Content: This element consists of a four (4)-character field to allow collection of short-term data points at a local or regional level. The centralization of data leads to the chance of duplication of coding for different data items. Therefore the North Dakota Department of Health, Division of EMS must assign the data item codes in an effort to prevent duplication. Agencies wishing to utilize this field must contact the EMS office to only receive the code numbers for their items they wish to track.

Business Rules: *Codes submitted in this field that were not assigned by the North Dakota Department of Health, Division of EMS will not be entered into the central database and marked as non-compliant by the system. This field will not effect the overall submission of a record. If the incident is appropriate to not report this data element or this field is not used by the agency, then this field must be submitted with the appropriate number of spaces.*

Technical Comments: It is recommend that this field be left justified with entries.

90.

Name of Data Element:	Research 2
Priority:	Desirable
Definition:	This is an additional field that is not defined by the State and allows local or regional authorities to collect random data not defined in this data set.
Code:	Alpha/numeric entry.
Field Length:	4
Field Starting and Ending Position:	576 - 579

Content: This element consists of a four (4)-character field to allow collection of short-term data points at a local or regional level. The centralization of data leads to the chance of duplication of coding for different data items. Therefore the North Dakota Department of Health, Division of EMS must assign the data iteming codes in an effort to prevent duplication. Agencies wishing to utilize this field must contact the EMS office to only receive the code numbers for their items they wish to track.

Business Rules: Codes submitted in this field that were not assigned by the North Dakota Department of Health, Division of EMS will not be entered into the central database and marked as non-compliant by the system. This field will not effect the overall submission of a record. If the incident is appropriate to not report this data element or this field is not used by the agency, then this field must be submitted with the appropriate number of spaces.

Technical Comments: It is recommend that this field be left justified with entries.

91.

Name of Data Element:	Dataset Version
Priority:	Mandatory
Definition:	Reports the version of the dataset format being used.
Code:	Numeric entry.
Field Length:	2
Field Starting and Ending Position:	580 - 581

Content: This element consists of a two (2)-character field used to track the version of the dataset the reported record's format is. Allows for tracking of changes in dataset and submission of old ASCII files. This will allow for backwards processing of old submission records.

Business Rules: *All Records submitted **must** have a Dataset Version entered.* Records with missing or an invalid entry will be rejected and marked as non-compliant by the system.

Technical Comments: The value for this field for this dataset is '01'.

Appendix A

EMS Agency List

Agency No	Agency Name	Agency No	Agency Name
0001	Almont Ambulance Service	0029	Dickinson Area Ambulance Svs, Inc.
0048	Altru Health System Ambulance Service	0027	Divide County Ambulance Service
0018	Ambulance Service, Inc.	0030	Drayton Volunteer Ambulance Association, Inc.
0002	Aneta Ambulance Service	0031	Edgeley Ambulance Service
0003	Ashley Ambulance Service	0032	Edmore Volunteer Ambulance Service
0125	Barnes County/City Ambulance	0033	Ellendale Community Ambulance Service
0143	Belcourt Ambulance Service	0072	Emmons County Ambulance Service
0005	Belfield Ambulance Service, Inc.	0034	Esmond Community Ambulance Service
0006	Berthold Ambulance Service, Inc.	0123	Falkirk Mining Company Ambulance Service
0084	Billings County Ambulance Service	0036	Fessenden Ambulance Service
0011	Binford Ambulance Service	0037	Finley Ambulance Service
0014	Bottineau Ambulance Service	0073	First Medic Ambulance of Ransom County, Inc.
0015	Bowbells Ambulance Service	0038	Flasher Ambulance Service
0016	Bowdon Ambulance Service	0144	F-M Ambulance Service, Inc, WF Unit
0017	Bowman Ambulance Squad, Inc.	0035	F-M Ambulance Service, Inc.
0020	Carpio Ambulance Service, Inc.	0039	Fordville Ambulance Service
0021	Carrington Health Center Ambulance	0042	Gackle Ambulance Service
0022	Carson Ambulance Service	0043	Garrison Ambulance District
0023	Casselton Ambulance Service, Inc.	0044	Glen Ullin Area Ambulance Service
0024	Cavalier Ambulance Service, Inc.	0045	Glenburn Area Ambulance Service, Inc.
0122	Coal Creek Station Ambulance Service, GRE	0145	Golden Heart EMS Ambulance Service
0095	Community Ambulance Svs – New Rockford	0046	Goodrich Ambulance Service
0004	Community Ambulance Svs - Beach	0049	Grenora Ambulance Service
0113	Community Ambulance Svs - Rolla	0050	Halliday Ambulance Service
0088	Community Ambulance Svs. Inc. - Minot	0051	Hankinson Volunteer Ambulance Service
0066	Community Volunteer Ambulance Svs - LaMoure	0052	Harvey Ambulance Service, Inc.
0026	Cooperstown Ambulance Service	0054	Hebron Ambulance Service
0008	Coteau Properties Co. Ambulance Service	0056	Hillsboro Ambulance Service
0009	Dakota Gasification Co. Ambulance Service		

Agency No	Agency Name	Agency No	Agency Name
0058	Hope Ambulance Service	0092	Napoleon Ambulance Service
0059	Hunter Ambulance Service	0093	New England Ambulance Service
0150	Jamestown Area Ambulance	0094	New Leipzig Ambulance Service
0061	Kenmare Ambulance Service	0140	New Leipzig Ambulance Service - Elgin
0117	Kidder County Ambulance Service	0096	New Salem Ambulance Service
0062	Killdeer Area Ambulance Service, Inc.	0097	New Town Community Ambulance Service District
0063	Kindred Area Ambulance Service, Inc.	0098	Northwood Ambulance Service
0064	Kulm Ambulance Corps, Inc.	0099	Oakes Vol. Ambulance Service
0028	Lake Region Ambulance Service	0025	Oliver County Ambulance Service
0065	Lakota Ambulance Service	0100	Page Ambulance Service
0067	Langdon Ambulance Service	0101	Park River Volunteer Ambulance Service, Inc.
0068	Lansford Ambulance Service	0102	Parshall Rural Ambulance Service, Inc.
0069	Larimore Ambulance Service, Inc.	0103	Pembina Ambulance Service, Inc.
0070	Leeds Ambulance Service	0104	Plaza Ambulance Service
0138	Lemmon EMT Assn.	0105	Portal Ambulance Service
0071	Lidgerwood Community Ambulance Service	0106	Powers Lake Ambulance Association
0074	Maddock Ambulance Service	0107	Ray Community Ambulance District
0146	Marmarth Ambulance Squad	0108	Regent Ambulance Service
0078	McClusky Rural Ambulance District	0109	Richardton-Taylor Ambulance Service
0079	McHenry Ambulance Service	0110	Riverdale Ambulance Department
0080	McIntosh Volunteer Fire Dept Ambulance Service	0111	Rock Lake Ambulance Service
0129	McKenzie County Ambulance Service	0112	Rolette Ambulance Service, Inc.
0082	McVille Community Ambulance Service	0114	Rugby Emergency Ambulance Service
0083	Medina Ambulance Service	0075	Ryder-Makoti Ambulance Service
0007	Mercer County Ambulance Service, Inc.	0086	Sargent County Ambulance Service
0053	Mercer County Ambulance Service, Inc.	0115	Sherwood Rural Ambulance Service
0012	Metro Area Ambulance Service, Inc.	0142	Spirit Lake Emergency Medical Services
0139	Metro-Area Ambulance Service, Inc.	0081	Standing Rock Ambulance
0085	Michigan Area Ambulance Service, Inc.	0041	Standing Rock Ambulance Service
0087	Minnewaukan Ambulance Service	0116	Stanley Ambulance Service
0089	Mohall Ambulance Service	0118	Tioga Ambulance Service
0090	Mott Ambulance Service	0019	Towner County Ambulance Service, Inc.
0091	Munich Rural Ambulance		

Agency No	Agency Name
0119	Towner Fire/ Ambulance & Rescue, Inc.
0147	TracSide EMS
0120	Turtle Lake Ambulance Service
0121	Underwood Ambulance Service
0124	Upham RFPD Ambulance Service
0047	Valley Ambulance & Rescue Service, Inc.
0126	Velva Ambulance Service
0127	Walhalla Ambulance Service
0128	Washburn Volunteer Ambulance Service
0055	West River Ambulance Service
0077	West Traill Ambulance Service
0130	Westhope Ambulance Service
0131	Williston Ambulance Service
0132	Willow City Ambulance Service
0133	Wilton Rural Ambulance Service
0134	Wing Rural Ambulance
0135	Wishek Ambulance Service
0136	Wyndmere-Barney Rural Ambulance District

Air Services

0601	Avera St Luke's Careflight
0604	Bismarck Air Medical, LLC
0602	Merit Care LifeFlight
0603	Trinity Hospital – NorthStar Criticair

Appendix B

Health Facility List

ID	Name	ID	Name
Hospitals			
5082	Air Force Base - Grand Forks	5035	Nelson County Health System
5081	Air Force Base - Minot	5060	North Dakota State Hospital
5021	Altru Hospital	5040	Northwood Deaconess Health Center
5057	Anne Carlsen School	5041	Oakes Community Hospital
5001	Ashley Medical Center	5009	Pembina County Memorial Hospital
5008	Carrington Health Center	5084	PHS Hospital - Fort Totten
5029	Cavalier County Memorial Hospital	5085	PHS Hospital - Fort Yates
5063	Children's Psychiatric Hospital	5086	PHS Hospital - New Town
5059	Community Memorial Hospital	5045	Presentation Medical Center
5010	Cooperstown Medical Center	5083	Quentin Burdick CHCF
5042	First Care Health Center	5066	Richard P. Stadter Psychiatric Center
5019	Garrison Memorial Hospital	5043	Richardton Health Center, Inc.
5046	Heart of America Medical Center	5024	Sakakawea Medical Center
5062	Heartland Medical Center Island Park	5064	SCCI Hospital - Central Dakotas
5016	Heartland Medical Center S. University	5065	SCCI Hospital - Fargo
5026	Hillsboro Medical Center Hospital	5006	Southwest Healthcare Services
5067	Innovis Health	5004	St. Alexius Medical Center
5014	Jacobson Memorial Hospital Care Center	5023	St. Aloisius Medical Center
5027	Jamestown Hospital	5005	St. Andrew's Health Center
5028	Kenmare Community Hospital	5054	St. Joseph's Hospital & Health Center
5030	Linton Hospital	5011	St. Luke's Hospital
5031	Lisbon Area Health Services	5060	State Hospital
5051	Mckenzie County Memorial Hospital	5048	Tioga Medical Center
5003	Medcenter One, Inc.	5061	Towner County Medical Center
5056	Medical Center Rehab. Hospital	5036	Trinity - St. Josephs
5012	Mercy Hospital of Devils Lake	5055	Trinity Hospitals
5050	Mercy Hospital of Valley City	5034	Union Hospital
5052	Mercy Medical Center	5020	Unity Medical Center
5018	MeritCare Hospital	5080	Veterans Administration
5068	MeritCare South University	5025	West River Regional Medical Center
5047	Mountrail County Medical Center	5053	Wishek Community Hospital

ID	Name
	Skilled Nursing Facility
1101	Aneta Parkview Health Center
1102	Arthur Good Samaritan Center
1103	Ashley Medical Center
1105	Baptist Home, Inc.
1136	Benedictine Living Center of Garrison
1127	Bethany Homes
1187	Bethel Lutheran Home
1110	Bottineau Good Samaritan Center
1146	Central Dakota Village
1117	Cooperstown Medical Center
1118	Crosby Good Samaritan Center
1157	Dacotah Alpha
1119	Devils Lake Good Samaritan Center
1123	Dunseith Community Nursing Home
1129	Elim Care Center
1167	Elm Crest Manor
1134	Four Seasons Health Care Center
1135	Garrison Memorial Hospital Nursing Facility
1115	Golden Acres Manor
1175	Heart of America Nursing Facility
1120	Heartland Care Center
1147	Hi-Acres Manor Nursing Center
1149	Hill Top Home of Comfort
1144	Hillcrest Care Center
1145	Hillsboro Medical Center Nursing Home
1124	Jacobson Memorial Hospital Care Center
1148	Kenmare Community Hospital SNU
1104	Knife River Care Center
1150	Lakota Good Samaritan Center
1153	Larimore Good Samaritan Center
1159	Luther Memorial Home
1166	Lutheran Home of the Good Shepherd
1138	Lutheran Sunset Home
1161	Manorcare Health Services

ID	Name
1130	Manorcare Health Services
1152	Maple Manor Care Center
1137	Marian Manor Healthcare Center
1126	Maryhill Manor
1158	Medcenter One Care Center
1177	Medcenter One Golden Manor
1109	Medcenter One St. Vincents Care
1106	Medcenter One Subacute Care Unit
1131	MeritCare Hospital TCU
1107	Missouri Slope Lutheran Care Center
1164	Mott Good Samaritan Nursing Center
1176	Mountrail Bethel Home
1165	Napoleon Care Center
1160	Nelson County Health System Care Center
1163	North Central Good Samaritan Center
1155	North Dakota Veterans Home
1169	Northwood Deaconess Health Center
1170	Oakes Manor Good Samaritan Center
1171	Osnabrock Good Samaritan Center
1172	Park River Good Samaritan Center
1156	Parkside Lutheran Home
1184	Pembilier Nursing Center
1180	Prairieview Health Care Center, Inc.
1174	Presentation Care Center
1125	Prince of Peace Care Center
1173	Rock View Good Samaritan Center
1132	Rosewood on Broadway
1181	Sheyenne Care Center
1182	Souris Valley Care Center
1112	Southwest Healthcare Services
1108	St. Alexius Transitional Care Unit
1142	St. Aloisius Medical Center-LTC
1121	St. Benedict's Health Center
1183	St. Catherine's Living Center
1141	St. Gerard's Community Nursing Home

ID	Name
1122	St. Luke's Home
1151	St. Rose Care Center
1178	Strasburg Nursing Home
1185	The Good Shepherd Home
1179	Tioga Medical Center LTC
1113	Towner County Living Center
1143	Tri-County Retirement and Nursing Home
1162	Trinity Homes
1139	Valley Eldercare Center
1133	Villa Maria Health Care
1116	Wedgewood Manor
1186	Westhope Home
1188	Wishek Home for the Aged
1140	Woodside Village

Out of State

5503	Canada - Other Hospitals
5504	Colorado - Other Hospitals
5431	Denver Childrens -CO
5430	University of Colorado -CO

ID	Name
5400	Abbott Northwest -MN
5401	Abbott Northwest -MN
5402	Childrens Hospital -MN
5403	Hennepin County -MN
5500	Minnesota - Other Hospitals
5404	North Memorial -MN
5405	Regional Hospital -MN
5088	St. Francis Medical Center -MN
5406	St. Marys Regional -MN
5407	University of Minnesota -MN
5502	Montana - Other Hospitals
5420	Avera Mckennan -SD
5421	Avera St. Lukes -SD
5422	Mobridge - SD
5423	Rapid City Regional -SD
5424	Sious Valley -SD
5501	South Dakota - Other Hospitals
5090	Other Out of State
9999	Unspecified

Appendix C

North Dakota City/County FIPS

FIPS ID	Name	FIPS ID	Name
Adams County		Barnes County	
02980	Argonne (Township of)	01780	Alta (Township of)
05700	Beisigl (Township of)	02300	Anderson (Township of)
10300	Bucyrus	03580	Ashtabula (Township of)
10340	Bucyrus (Township of)	04340	Baldwin (Township of)
13100	Cedar (Township of)	06140	Berea
13270	Central Adams	07100	Binghampton (Township of)
13500	Chandler (Township of)	09420	Brimer (Township of)
14620	Clermont (Township of)	17260	Cuba
18100	Darling Springs (Township of)	17300	Cuba (Township of)
20700	Duck Creek (Township of)	17670	Daily
21495	East Adams	18340	Dazey
30340	Gilstrap (Township of)	18380	Dazey (Township of)
36540	Haynes	21540	Eastedge
37700	Hettinger	21780	Eckelson
37740	Hettinger (Township of)	21820	Eckelson (Township of)
38420	Holden	22460	Edna (Township of)
45895	Lemmon	23500	Ellsbury (Township of)
46500	Lightning Creek (Township of)	26380	Fingal
49780	Maine (Township of)	30060	Getchell (Township of)
57940	North Lemmon	32340	Grand Prairie (Township of)
57980	North Lemmon (Township of)	33020	Green (Township of)
59620	Orange (Township of)	33380	Greenland (Township of)
62020	Petrel	36020	Hastings
65900	Reeder	37180	Hemen (Township of)
65940	Reeder (Township of)	38300	Hobart (Township of)
71380	Scott (Township of)	41500	Kathryn
74140	South Fork (Township of)	43380	Koldok
78220	Taylor Butte (Township of)	43980	Lake Town (Township of)
85380	Whetstone (Township of)	45460	Leal
87140	Wolf Butte (Township of)	47140	Litchville
41060	Jordan (Township of)	48380	Lucca

FIPS ID	Name
50340	Mansfield (Township of)
50900	Marsh (Township of)
51700	Meadow Lake (Township of)
53340	Minnie Lake (Township of)
55820	Nelson (Township of)
57140	Noltimier (Township of)
57180	Nome
57420	Norma (Township of)
58170	North Valley City
58780	Oakhill (Township of)
59660	Oriska
59700	Oriska (Township of)
61300	Peak
62460	Pierce (Township of)
62540	Pillsbury
64020	Potter (Township of)
65380	Raritan (Township of)
67620	Rogers
67660	Rogers (Township of)
68140	Rosebud (Township of)
70380	Sanborn
72820	Sibley
72940	Sibley Trail (Township of)
73500	Skandia (Township of)
74900	Spring Creek (Township of)
75100	Springvale (Township of)
76020	Stewart (Township of)
77300	Svea (Township of)
78700	Thordenskjold (Township of)
79340	Tower City
80940	Urbana
80980	Uxbridge (Township of)
81080	Valley (Township of)
81180	Valley City
81220	Valley City (sta.)
84220	Weimer (Township of)

FIPS ID	Name
86620	Wimbledon
28180	Frazier
Benson County	
00980	Albert (Township of)
03180	Arne (Township of)
03860	Aurora (Township of)
04260	Baker
05620	Beaver (Township of)
09460	Brinsmade
09740	Broe (Township of)
11260	Butte Valley (Township of)
15580	Comstock
21620	East Fork (Township of)
22780	Eldon (Township of)
24780	Esmond
24820	Esmond (Township of)
26300	Fillmore
26780	Flora
27700	Fort Totten
27750	Fort Totten
35460	Harlow
37620	Hesper
37660	Hesper (Township of)
39860	Impark (Township of)
40180	Iowa (Township of)
40220	Irvine (Township of)
40265	Isabel
40260	Isabel (Township of)
41100	Josephine
43260	Knox
43300	Knox (Township of)
43900	Lake Ibsen (Township of)
44380	Lallie
44420	Lallie (Township of)
44425	Lallie North

FIPS ID	Name
45580	Leeds
45620	Leeds (Township of)
47620	Lohnes (Township of)
49620	Maddock
48980	McClellan (Township of)
53060	Minco (Township of)
53220	Minnewaukan
53580	Mission (Township of)
56900	Niles
57580	Normania (Township of)
58180	North Viking (Township of)
59020	Oberon
59060	Oberon (Township of)
63180	Pleasant Lake
63200	Pleasant Lake (Township of)
66660	Rich Valley (Township of)
66820	Riggin (Township of)
67300	Rock (Township of)
74380	South Viking (Township of)
70140	St. Michael
78900	Tilden
79060	Tokio
80380	Twin Lake (Township of)
80420	Twin Tree (Township of)
83580	Warwick
83620	Warwick (Township of)
84540	West Antelope (Township of)
84620	West Bay (Township of)
87420	Wood Lake (Township of)
87860	York
87900	York (Township of)
27780	Fort Totten Indian Reservation
74640	Spirit Lake Reservation
63060	Pleasant (Township of)
19445	Devils Lake Sioux Indian Reservation

FIPS ID	Name
17000	Crow Hill (District)
27710	Fort Totten (District)
70150	St. Michael (District)
87430	Wood Lake (District)
Billings County	
25220	Fairfield
28740	Fryburg
31660	Gorham
47300	Little Missouri
51900	Medora
57710	North Billings
71280	Scoria Point
74070	South Billings
76900	Sully Springs
78600	Theodore Roosevelt National Park
Bottineau County	
02100	Amity (Township of)
02660	Antler
02700	Antler (Township of)
05930	Belmar
06020	Bentinck (Township of)
07540	Blaine (Township of)
08460	Bottineau
09060	Brander (Township of)
12140	Carbury
13060	Cecil (Township of)
13780	Chatfield (Township of)
15980	Cordelia (Township of)
17540	Cut Bank (Township of)
17780	Dalen (Township of)
18500	Deep
20980	Dunning
21900	Eckman

FIPS ID	Name
22620	Eidsvold (Township of)
23780	Elms (Township of)
23980	Elysian (Township of)
27220	Forfar
29180	Gardena
35220	Haram (Township of)
36060	Hastings (Township of)
38380	Hoffman (Township of)
38540	Homen (Township of)
39540	Hurd
41300	Kane (Township of)
43500	Kramer
43660	Kuroki
43940	Lake Metigoshe
44700	Landa
44900	Lansford
44940	Lansford (Township of)
46260	Lewis (Township of)
48060	Lordsburg (Township of)
51420	Maxbass
54900	Mount Rose (Township of)
55940	Newborg (Township of)
56020	Newburg
58700	Oak Creek (Township of)
58860	Oak Valley (Township of)
59420	Omemee
60180	Ostby (Township of)
60380	Overly
61180	Peabody (Township of)
62300	Pickering (Township of)
66105	Renville
66100	Renville (Township of)
66540	Richburg (Township of)
67740	Roland (Township of)
68620	Roth
69180	Russell

FIPS ID	Name
71060	Scandia (Township of)
71340	Scotia (Township of)
71820	Sergius (Township of)
72500	Sherman (Township of)
74020	Souris
75500	Starbuck (Township of)
76260	Stone Creek (Township of)
77740	Tacoma (Township of)
78040	Tasco
79790	Truro
83980	Wayne (Township of)
84340	Wellington (Township of)
85020	Westhope
85260	Wheaton (Township of)
85420	Whitby (Township of)
85455	White
85860	Whitteron (Township of)
86380	Willow City
86500	Willow Vale (Township of)
	Bowman
00540	Adelaide (Township of)
02140	Amor (Township of)
08700	Bowman
08740	Bowman (Township of)
08820	Boyesen (Township of)
10380	Buena Vista (Township of)
10500	Buffalo Springs
26540	Fischbein (Township of)
29540	Gascoyne
29580	Gascoyne (Township of)
29740	Gem (Township of)
31300	Goldfield (Township of)
31940	Grainbelt (Township of)
32460	Grand River (Township of)
33620	Griffin
34265	Haley

FIPS ID	Name
34260	Haley (Township of)
35780	Hart
40420	Ives
43700	Ladd (Township of)
44740	Langberg (Township of)
50740	Marion (Township of)
53140	Minnehaha (Township of)
55580	Nebo (Township of)
61420	Peerless Mine
66300	Rhame
66340	Rhame (Township of)
71500	Scranton
71540	Scranton (Township of)
75460	Star (Township of)
76140	Stillwater (Township of)
77060	Sunny Slope (Township of)
77900	Talbot (Township of)
84650	West Bowman
85780	Whiting (Township of)
Burke County	
03610	Atcoal
05340	Battleview
05380	Battleview (Township of)
08500	Bowbells
08540	Bowbells (Township of)
12500	Carter (Township of)
14300	Clayton (Township of)
14500	Cleary (Township of)
15460	Columbus
15500	Colville (Township of)
16180	Coteau
17740	Dale (Township of)
19660	Dimond (Township of)
25940	Fay (Township of)
26700	Flaxton

FIPS ID	Name
26940	Foothills (Township of)
27460	Forthun (Township of)
29380	Garness (Township of)
35540	Harmonious (Township of)
41280	Kandiyohi (Township of)
41660	Keller (Township of)
42740	Kincaid
44020	Lakeview (Township of)
45220	Larson
45420	Leaf Mountain (Township of)
46540	Lignite
46580	Lignite Junction
48420	Lucy (Township of)
53180	Minnesota (Township of)
57715	North Burke
58140	North Star (Township of)
57860	Northgate
61700	Perella
63740	Portal
63780	Portal (Township of)
64140	Powers Lake
66580	Richland (Township of)
66860	Rival
66900	Rival Junction
68340	Roseland (Township of)
72740	Short Creek (Township of)
73900	Soo (Township of)
74620	Spiral
75220	Stampede
78780	Thorson (Township of)
81020	Vale (Township of)
81500	Vanville (Township of)
83420	Ward (Township of)
87060	Woburn
41340	Kaniyohi (Township of)

FIPS ID	Name
	Burleigh County
02780	Apple Creek (Township of)
02820	Apple Valley
02940	Arena
03270	Arnold
04380	Baldwin
07200	Bismarck
07207	Bismarck Bomb Scoring Site
07215	Bismarck Municipal Airport
08780	Boyd (Township of)
09590	Brittin
11045	Burnt Creek-Riverview
11940	Canfield (Township of)
14060	Christiania (Township of)
14380	Clear Lake (Township of)
16860	Crofte (Township of)
16900	Cromwell (Township of)
19970	Double Ditch Indian Village
20500	Driscoll
20540	Driscoll (Township of)
21860	Ecklund (Township of)
24940	Estherville (Township of)
26860	Florence Lake (Township of)
27500	Fort Lincoln (Indian Training Center)
28100	Francis (Township of)
30100	Ghylin (Township of)
30140	Gibbs (Township of)
30900	Glenview (Township of)
30980	Glenwood Estates
32740	Grass Lake (Township of)
33060	Green Acres Estates
35670	Harriet-Lein (Township of)
36460	Hay Creek (Township of)
36660	Hazel Grove (Township of)
46640	Lincoln

FIPS ID	Name
46710	Lincoln-Fort Rice
47500	Logan (Township of)
47860	Long Lake (Township of)
48620	Lyman
51180	Mary College
49340	McKenzie
49380	McKenzie (Township of)
52180	Menoken (Burleigh)
52220	Menoken (Township of)
52815	Midway
53620	Missouri (Township of)
53740	Moffit (BN RR name Moffitt)
54460	Morton (Township of)
55540	Naughton (Township of)
60580	Painted Woods (Township of)
62160	Phoenix
62500	Pierce
63540	Ponderosa
64380	Prairie View Acres
65980	Regan
66635	Richmond (Township of)
67420	Rock Hill (Township of)
71220	Schrunk (Township of)
72900	Sibley Butte (Township of)
75820	Steiber (Township of)
75900	Sterling
75940	Sterling (Township of)
76100	Still
77780	Taft (Township of)
78300	Telfer (Township of)
78580	Thelma (Township of)
79820	Trygg (Township of)
80540	Tyler's Western Village
85980	Wild Rose (Township of)
86540	Wilson (Township of)
86580	Wilton

FIPS ID	Name
86780	Wing
86820	Wing (Township of)
87080	Wogansport
11040	Burnt Creek (Township of)
84655	West Burleigh
27540	Fort Lincoln Estates
07203	Bismarck
27670	Fort Rice (Township of)
46645	Lincoln
10900	Burleigh (Menoken)
21510	East Burleigh
66650	Richmond
35660	Harriet (Township of)
45780	Lein (Township of)
Cass County	
00180	Absaraka
00460	Addison
00500	Addison (Township of)
01420	Alice
01940	Amenia
01980	Amenia (Township of)
03020	Argusville
03300	Arthur
03340	Arthur (Township of)
04020	Ayr
04060	Ayr (Township of)
04900	Barnes (Township of)
05900	Bell (Township of)
06260	Berlin (Township of)
09320	Briarwood
09830	Brooktree Park
10420	Buffalo
10460	Buffalo (Township of)
12700	Casselton
12740	Casselton (Township of)

FIPS ID	Name
13340	Chaffee
14780	Clifton (Township of)
16100	Cornell (Township of)
17820	Dalrymple Spur
18180	Davenport
18220	Davenport (Township of)
20220	Dows (Township of)
21060	Durbin
21100	Durbin (Township of)
22860	Eldred (Township of)
24020	Embden
24140	Empire (Township of)
24260	Enderlin
24620	Erie
24660	Erie (Township of)
24700	Erie Junction
25025	Everest
25020	Everest (Township of)
25700	Fargo
25740	Fargo (Township of)
26260	Fife
28720	Frontier
29220	Gardner
29260	Gardner (Township of)
30260	Gill (Township of)
32300	Grandin
33820	Gunkel (Township of)
35580	Harmony (Township of)
35940	Harwood
35980	Harwood (Township of)
37780	Hickson
37900	Highland (Township of)
38060	Hill (Township of)
38900	Horace
39140	Howes (Township of)
39460	Hunter

FIPS ID	Name
39500	Hunter (Township of)
42780	Kindred
42980	Kinyon (Township of)
43780	Lake (Township of)
45980	Leonard
46020	Leonard (Township of)
48625	Lynchburg
49700	Magnolia
50540	Maple River (Township of)
50580	Mapleton
50620	Mapleton (Township of)
51300	Mason
55260	Myra
56460	Newman
57020	Noble (Township of)
57100	Nolan
57535	Norman
57620	Normanna (Township of)
57660	Norpak
58120	North River
60480	Oxbow
60500	Page
60540	Page (Township of)
62700	Pinkham
63100	Pleasant (Township of)
63580	Pontiac (Township of)
64320	Prairie Rose
64780	Prosper
65620	Raymond (Township of)
65860	Reed (Township of)
66040	Reile's Acres
66460	Rich (Township of)
67260	Rochester (Township of)
69020	Rush River (Township of)
69780	St. Benedict
75340	Stanley (Township of)

FIPS ID	Name
79300	Tower (Township of)
79340	Tower City
81340	Vance
82740	Walburg (Township of)
82860	Walden
83460	Warren
83500	Warren (Township of)
83940	Watson (Township of)
85180	Wheatland
85220	Wheatland (Township of)
85940	Wild Rice
86980	Wiser (Township of)
87500	Woods
84820	West Fargo (sta.) (Riverside)
84860	West Fargo Industrial Park
84780	West Fargo
74500	South West Fargo
36920	Hector Field (Airport)
75660	State University (North Dakota Sate Univ.)
67060	Riverside (RR name West Fargo (sta.))
Cavalier County	
01660	Alma (Township of)
01740	Alsen
04660	Banner (Township of)
06940	Billings (Township of)
09900	Bruce (Township of)
11460	Byron (Township of)
11580	Calio
11700	Calvin
14940	Clyde
17580	Cypress (Township of)
20420	Dresden
20460	Dresden (Township of)

FIPS ID	Name
21420	Easby
21460	Easby (Township of)
21500	East Alma (Township of)
22980	Elgin (Township of)
28540	Fremont (Township of)
30780	Glenila (Township of)
31620	Gordon (Township of)
33580	Grey (Township of)
34980	Hanks Corner
35060	Hannah
35860	Harvey (Township of)
36420	Hay (Township of)
37220	Henderson (Township of)
38820	Hope (Township of)
38980	Hove Mobile Park
39660	Huron (Township of)
44780	Langdon
44820	Langdon (Township of)
46940	Linden (Township of)
47380	Loam (Township of)
47660	Loma
49740	Maida
50100	Manilla (Township of)
53020	Milton
53500	Minto (Township of)
54060	Montrose (Township of)
54500	Moscow (Township of)
54780	Mount Carmel
54820	Mount Carmel (Township of)
55020	Munich
55740	Nekoma
55780	Nekoma (Township of)
58020	North Loma (Township of)
58060	North Olga (Township of)
59220	Olga
59980	Osford (Township of)

FIPS ID	Name
60100	Osnabrock
60140	Osnabrock (Township of)
61740	Perry (Township of)
70780	Sarles
71620	Seivert (Township of)
74100	South Dresden (Township of)
74300	South Olga (Township of)
76380	Storlie (Township of)
79540	Trier (Township of)
80700	Union
81375	Vang
82940	Wales
83820	Waterloo (Township of)
84060	Weaver
85060	West Hope (Township of)
Dickey County	
00300	Ada (Township of)
01020	Albertha (Township of)
01060	Albion (Township of)
05500	Bear Creek (Township of)
14545	Clement
14540	Clement (Township of)
19700	Divide (Township of)
20650	Duane
22740	Elden (Township of)
23220	Ellendale
23260	Ellendale (Township of)
23540	Elm (Township of)
26980	Forbes
28780	Fullerton
29900	German (Township of)
31020	Glover
32500	Grand Valley (Township of)
33780	Guelph
34500	Hamburg (Township of)

FIPS ID	Name
39220	Hudson (Township of)
40540	James River Valley (Township of)
42300	Kent (Township of)
42340	Kentner (Township of)
42500	Keystone (Township of)
48140	Lorraine (Township of)
48260	Lovell (Township of)
48460	Ludden
50500	Maple (Township of)
52460	Merricourt
53820	Monango
53860	Monango Crossing
58220	Northwest (Township of)
58500	Norway
58740	Oakes
63820	Port Emma (Township of)
63860	Porter (Township of)
63980	Potsdam (Township of)
66940	Riverdale (Township of)
75140	Spring Valley (Township of)
81100	Valley (Township of)
81460	Van Meter (Township of)
85700	Whitestone (Township of)
86920	Wirsch
87620	Wright (Township of)
87940	Yorktown (Township of)
87980	Young (Township of)

Divide County

01300	Alexandria (Township of)
01500	Alkabo
01860	Ambrose
01900	Ambrose (Township of)
07900	Blooming Prairie (Township of)
07940	Blooming Valley (Township of)

FIPS ID	Name
08340	Border (Township of)
08470	Bounty
10780	Burg (Township of)
14900	Clinton (Township of)
15020	Coalfield (Township of)
15260	Colgan
16940	Crosby
17940	Daneville (Township of)
19500	De Witt (Township of)
23140	Elkhorn (Township of)
26140	Fertile Valley (Township of)
26340	Fillmore (Township of)
27820	Fortuna
27830	Fortuna Air Force Station
28220	Frazier (Township of)
28340	Frederick (Township of)
29420	Garnet (Township of)
31580	Gooseneck (Township of)
36300	Hawkeye (Township of)
36500	Hayland (Township of)
41270	Juno
42410	Kermit
46740	Lincoln Valley (Township of)
47780	Long Creek (Township of)
52260	Mentor (Township of)
57220	Noonan
60700	Palmer (Township of)
61135	Paulson
63340	Plumer (Township of)
73420	Sioux Trail (Township of)
73700	Smoky Butte (Township of)
75170	Stady
76300	Stoneview (Township of)
79660	Troy (Township of)
80260	Twin Butte (Township of)
80900	Upland (Township of)

FIPS ID	Name
84665	Westby
84660	Westby (Township of)
87660	Writing Rock (Township of)
	Dunn County
19820	Dodge
20940	Dunn Center
24080	Emerson
25950	Fayette
27330	Fort Berthold
27340	Fort Berthold Indian Reservation
34340	Halliday
34350	Halliday
38270	Hirschville
42700	Killdeer
42705	Killdeer
50220	Manning
50940	Marshall
51825	Medicine Hole
56340	New Hradec
58720	Oakdale
74105	South Dunn
80300	Twin Buttes
84460	Werner
49960	Mandaree (Segment)
80310	Twin Buttes (Segment)
	Eddy County
09140	Brantford
11140	Bush (Township of)
13820	Cherry Lake (Township of)
15420	Columbia (Township of)
15540	Colvin (Township of)
19705	Divide
20860	Dundas
21980	Eddy (Township of)

FIPS ID	Name
28420	Freeborn (Township of)
29700	Gates (Township of)
32020	Grandfield (Township of)
34420	Hamar
38180	Hillsdale (Township of)
44100	Lake Washington (Township of)
55060	Munster
55100	Munster (Township of)
56620	New Rockford
56660	New Rockford (Township of)
60740	Paradise (Township of)
63220	Pleasant Prairie (Township of)
68180	Rosefield (Township of)
72140	Sheldon (Township of)
72580	Sheyenne
77140	Superior (Township of)
78860	Tiffany (Township of)
27780	Fort Totten Indian Reservation
74640	Spirit Lake Reservation
19445	Devils Lake Sioux Indian Reservation
17000	Crow Hill (District)
87430	Wood Lake (District)
	Emmons County
08900	Braddock
10140	Buchanan Valley (Township of)
11780	Campbell (Township of)
17860	Dana
17900	Danbury (Township of)
32785	Grassna
34180	Hague
35260	Harding (Township of)
36700	Hazelton
36740	Hazelton (Township of)
39380	Hull

FIPS ID	Name
42940	Kintyre
46650	Lincoln (Township of)
46980	Linton
47340	Livona
49100	McCulley (Township of)
57730	North Emmons
57725	Northeast Emmons
74120	South Emmons
76500	Strasburg
76820	Sueltz Spur
78340	Tell (Township of)
78420	Temvik
84668	West Emmons
84900	Westfield
87300	Wood (Township of)
64340	Prairie View (Township of)
Foster County	
04860	Barlow
07140	Birtsell (Township of)
08380	Bordulac
08420	Bordulac (Township of)
10020	Bucephalia (Township of)
12340	Carrington
12380	Carrington (Township of)
21700	Eastman (Township of)
24900	Estabrook (Township of)
26820	Florance (Township of)
30660	Glenfield
30700	Glenfield (Township of)
31740	Grace City
33860	Guptill
36260	Haven (Township of)
41140	Juanita
45180	Larrabee (Township of)
45890	Lemert

FIPS ID	Name
47900	Longview (Township of)
49260	McHenry
49300	McHenry (Township of)
49500	McKinnon (Township of)
52060	Melville
52100	Melville (Township of)
57380	Nordmore (Township of)
67900	Rolling Prairie (Township of)
68300	Rose Hill (Township of)
87700	Wyand (Township of)
Golden Valley County	
05420	Beach
05460	Beach (Township of)
10660	Bullion (Township of)
13440	Chama
18940	De Mores
18900	Delhi (Township of)
21665	East Golden Valley
22660	Ekre Spur
23100	Elk Creek (Township of)
23860	Elmwood (Township of)
29340	Garner (Township of)
31420	Golva
37340	Henry (Township of)
38580	Home On The Range For Boys
47700	Lone Tree (Township of)
57865	North Golden Valley
61340	Pearl (Township of)
66700	Rider
69580	Saddle Butte (Township of)
71740	Sentinel (Township of)
71780	Sentinel Butte
74180	South Golden Valley
78540	Thelan
79620	Trotters

FIPS ID	Name
	Grand Forks County
00820	Agnes (Township of)
01620	Allendale (Township of)
02020	Americus (Township of)
03380	Arvilla
03420	Arvilla (Township of)
03940	Avon (Township of)
06100	Bentru (Township of)
07860	Blooming (Township of)
08180	Bolack
09300	Brenna (Township of)
11660	Calspur
13860	Chester (Township of)
22300	Edisons
23180	Elkmount (Township of)
23700	Elm Grove (Township of)
24060	Emerado
25260	Fairfield (Township of)
25540	Falconer (Township of)
26020	Ferry (Township of)
26620	Flaat
27180	Forest River Colony
30180	Gilby
30220	Gilby (Township of)
31700	Grace (Township of)
32060	Grand Forks
32100	Grand Forks (Township of)
32140	Grand Forks Air Force Base
32165	Grand Forks International
32180	Grand Forks Junction
35070	Hannah Junction
36940	Hegton (Township of)
38460	Holmes
38700	Honeyford
39980	Inkster

FIPS ID	Name
40020	Inkster (Township of)
40900	Johnstown
40940	Johnstown (Township of)
41740	Kelly
41940	Kempton
44060	Lakeville (Township of)
45020	Larimore
45060	Larimore (Township of)
46180	Levant (Township of)
46820	Lind (Township of)
47585	Logan Center
47580	Logan Center (Township of)
48100	Loretta (Township of)
50420	Manvel
48940	McCanna
51940	Mekinock
51980	Mekinock (Township of)
52500	Merrifield
52620	Michigan (Township of)
54300	Moraine (Township of)
56780	Niagara
56820	Niagara (Township of)
57870	North Grand Forks
58300	Northwood
58340	Northwood (Township of)
58900	Oakville (Township of)
59780	Orr
63300	Pleasant View (Township of)
63380	Plymouth (Township of)
64060	Powell
66260	Reynolds
69540	Rye (Township of)
72020	Shawnee
76420	Strabane (Township of)
78660	Thompson
80060	Turtle River (Township of)

FIPS ID	Name
80740	Union (Township of)
83140	Walle (Township of)
83740	Washington (Township of)
85140	Wheatfield (Township of)
74420	South Washington
80780	University of North Dakota
Grant County	
09540	Brisbane
12460	Carson
13280	Central Grant
21670	East Grant
23020	Elgin
23580	Elm (Township of)
26580	Fisher (Township of)
28305	Freda
28300	Freda (Township of)
36980	Heil
39060	Howe (Township of)
40840	Johnson Ford
45100	Lark
45140	Lark (Township of)
45820	Leipzig (Township of)
45860	Leith
53300	Minnie (Township of)
56420	New Leipzig
60300	Otter Creek (Township of)
64580	Pretty Rock (Township of)
65100	Raleigh
65140	Raleigh (Township of)
67340	Rock (Township of)
71260	Schultz (Township of)
72660	Shields
69900	St. Gertrude
85000	West Grant
86900	Winona (Township of)

FIPS ID	Name
09545	Brisbane (Township of)
72700	Shields (Township of)
10260	Buckskin (Township of)
Griggs County	
00420	Addie (Township of)
04540	Ball Hill (Township of)
05180	Bartley (Township of)
07020	Binford
09660	Broadview (Township of)
09940	Bryan (Township of)
14340	Clearfield (Township of)
15900	Cooperstown
15940	Cooperstown (Township of)
20060	Dover (Township of)
33260	Greenfield (Township of)
35020	Hannaford
37100	Helena (Township of)
40740	Jessie
41460	Karnak
42820	Kingsley (Township of)
45900	Lenora (Township of)
48820	Mabel (Township of)
54540	Mose
62580	Pilot Mound (Township of)
66180	Revere
67980	Romness (Township of)
68460	Rosendal (Township of)
72340	Shepard
77260	Sutton
77340	Sverdrup (Township of)
80580	Tyrol (Township of)
83300	Walum
83660	Washburn (Township of)
86300	Willow (Township of)

FIPS ID	Name
	Hettinger County
00220	Acme (Township of)
01100	Alden (Township of)
03460	Ashby (Township of)
04220	Baer (Township of)
05680	Beery (Township of)
06060	Bentley
07380	Black Butte (Township of)
09580	Brittian (Township of)
11060	Burt
11820	Campbell (Township of)
11980	Cannon Ball (Township of)
12780	Castle Rock (Township of)
13980	Chilton (Township of)
14220	Clark (Township of)
25780	Farina (Township of)
36180	Havelock
36220	Havelock (Township of)
37940	Highland (Township of)
39940	Indian Creek (Township of)
42100	Kennedy (Township of)
42420	Kern (Township of)
43620	Kunze (Township of)
49660	Madison (Township of)
52540	Merrill (Township of)
54620	Mott
54660	Mott (Township of)
56180	New England
56220	New England (Township of)
59100	Odessa (Township of)
66020	Regent
66740	Rifle (Township of)
73860	Solon (Township of)
69820	St. Croix (Township of)
75860	Steiner (Township of)
76740	Strehlow (Township of)

FIPS ID	Name
78460	Tepee Butte (Township of)
82620	Wagendorf (Township of)
83060	Walker (Township of)
83900	Watrous
06420	Berry (Township of)
	Kidder County
01580	Allen (Township of)
03700	Atwood (Township of)
04300	Baker (Township of)
10180	Buckeye (Township of)
10740	Bunker (Township of)
13900	Chestina (Township of)
14420	Clear Lake (Township of)
17020	Crown Hill (Township of)
17180	Crystal Springs
17220	Crystal Springs (Township of)
18260	Dawson
25100	Excelsior (Township of)
28620	Frettim (Township of)
31780	Graf (Township of)
36580	Haynes (Township of)
42580	Kickapoo (Township of)
43740	Ladoga
44140	Lake Williams
44180	Lake Williams (Township of)
50260	Manning (Township of)
52420	Merkel (Township of)
58260	Northwest (Township of)
61220	Peace (Township of)
61980	Petersville (Township of)
62060	Pettibone
62100	Pettibone (Township of)
63140	Pleasant Hill (Township of)
64940	Quinby (Township of)
66220	Rexine (Township of)

FIPS ID	Name
67180	Robinson
67220	Robinson (Township of)
72860	Sibley (Township of)
74190	South Kidder
75780	Steele
76060	Stewart (Township of)
77940	Tanner (Township of)
77980	Tappen
78020	Tappen (Township of)
80140	Tuttle
80180	Tuttle (Township of)
81140	Valley (Township of)
81820	Vernon (Township of)
83100	Wallace (Township of)
84260	Weiser (Township of)
84980	Westford (Township of)
86100	Williams (Township of)
87460	Woodlawn (Township of)
LaMoure County	
00620	Adrian
00660	Adrian (Township of)
01340	Alfred
04180	Badger (Township of)
06300	Berlin
07420	Black Loam (Township of)
07980	Bluebird (Township of)
18420	Dean (Township of)
18780	Deisem
19580	Dickey
22140	Edgeley
22180	Edgeley Junction
30420	Gladstone (Township of)
30540	Glen (Township of)
30820	Glenmore (Township of)
31100	Golden Glen (Township of)

FIPS ID	Name
32380	Grand Rapids
32420	Grand Rapids (Township of)
32540	Grandview (Township of)
33460	Greenville (Township of)
37300	Henrietta (Township of)
39900	Independence
41180	Jud
42140	Kennison (Township of)
43580	Kulm
44540	LaMoure
47180	Litchville (Township of)
50780	Marion
51740	Medberry
52860	Mikkelson (Township of)
57300	Nora (Township of)
57340	Norden (Township of)
58420	Nortonville
60420	Ovid (Township of)
61380	Pearl Lake (Township of)
63500	Pomona View (Township of)
64220	Prairie (Township of)
65260	Raney (Township of)
65540	Ray (Township of)
68060	Roscoe (Township of)
69220	Russell (Township of)
69420	Ryan (Township of)
70660	Saratoga (Township of)
72460	Sheridan (Township of)
77380	Swede (Township of)
81900	Verona
83380	Wano (Township of)
86340	Willowbank (Township of)
Logan County	
09980	Bryant (Township of)
11020	Burnstad

FIPS ID	Name
19740	Dixon (Township of)
21675	East Logan
26500	Finn (Township of)
28380	Fredonia
28860	Gackle
30620	Glendale (Township of)
33940	Gutschmidt (Township of)
33980	Guyson
34060	Haag (Township of)
40620	Janke (Township of)
45740	Lehr
55420	Napoleon
61840	Peters
65700	Red Lake (Township of)
71580	Sealy (Township of)
75540	Starkey (Township of)
85065	West Logan
43540	Kroeber (Township of)
McHenry Country	
02220	Anamoose
02260	Anamoose (Township of)
04460	Balfour
04500	Balfour (Township of)
04740	Bantry
04780	Bantry (Township of)
06180	Bergen
06540	Berwick
06580	Berwick (Township of)
07300	Bjornson (Township of)
09860	Brown (Township of)
15130	Cole Ford
16260	Cottonwood Lake (Township of)
18540	Deep River (Township of)
18620	Deering
18660	Deering (Township of)

FIPS ID	Name
18980	Denbigh
19020	Denbigh (Township of)
20300	Drake
21679	East McHenry
22580	Egg Creek (Township of)
25620	Falsen (Township of)
28820	Funston
29820	Genoa
30300	Gilmore (Township of)
32660	Granville
32700	Granville (Township of)
33700	Grilley (Township of)
33900	Guthrie
37260	Hendrickson (Township of)
41380	Karlsruhe
41420	Karlsruhe (Township of)
42660	Kief
43420	Kongsberg
43460	Kottke Valley (Township of)
43820	Lake George (Township of)
43860	Lake Hester (Township of)
44660	Land (Township of)
45380	Layton (Township of)
45500	Lebanon (Township of)
47260	Little Deep (Township of)
51660	Meadow (Township of)
53010	Milroy
54980	Mouse River (Township of)
56540	Newport (Township of)
57500	Normal (Township of)
58100	North Prairie (Township of)
57727	Northeast McHenry
58620	Norwich
58660	Norwich (Township of)
59180	Odin (Township of)
59300	Olivia (Township of)

FIPS ID	Name
64420	Pratt (Township of)
65300	Rangeley
66785	Riga
66780	Riga (Township of)
66840	Rising
68310	Rose Hill (Township of)
68660	Round Lake (Township of)
70340	Saline (Township of)
71180	Schiller (Township of)
73260	Simcoe
75020	Spring Grove (Township of)
76700	Strege (Township of)
79420	Towner
80860	Upham
81620	Velva
81660	Velva (Township of)
81740	Verendrye
82220	Villard (Township of)
82380	Voltaire
82420	Voltaire (Township of)
82580	Wagar (Township of)
86420	Willow Creek (Township of)
McIntosh County	
03540	Ashley
18020	Danzig
21683	East McIntosh
45740	Lehr
48290	Lowell
58265	Northwest McIntosh
67940	Roloff (Township of)
74505	Southwest McIntosh
81700	Venturia
87020	Wishek
88180	Zeeland

FIPS ID	Name
McKenzie County	
01140	Alex (Township of)
01180	Alexander
03220	Arnegard
03260	Arnegard (Township of)
04650	Banks
08020	Blue Butte (Township of)
12540	Cartwright
13290	Central McKenzie
13540	Charbon (Township of)
13580	Charbonneau
13620	Charlson
16500	Cowles Beet Siding
16850	Croff
19940	Dore
21580	East Fairview
21687	East McKenzie
23060	Elk (Township of)
23820	Elm Tree (Township of)
27332	Fort Berthold
27340	Fort Berthold Indian Reservation
27940	Four Bears Health Center
27950	Four Bears Village
31900	Grail (Township of)
32820	Grassy Butte
35280	Harding
35380	Hardy Beet Siding
36340	Hawkeye (Township of)
40860	Johnsons Corner
41540	Keene
41580	Keene (Township of)
49980	Mandaree
58045	North McKenzie
61760	Pershing
63420	Poe (Township of)
65220	Randolph (Township of)

FIPS ID	Name
65500	Rawson
66380	Rhoades (Unorganized Territory)
67140	Riverview (Township of)
71105	Schafer
73380	Sioux (Township of)
73490	Skaar
74110	Southeast McKenzie
74510	Southwest McKenzie
74750	Spotted Horn
78600	Theodore Roosevelt National Park
78905	Timber Creek
79520	Tri (Township of)
80460	Twin Valley (Township of)
83860	Watford City
85900	Wilbur (Township of)
87820	Yellowstone (Township of)
02600	Antelope Creek (Township of)
02500	Antelope (Township of)
05540	Bear Den (Township of)
39780	Ideal (Township of)
57820	Northfork
71100	Schafer (Township of)
27920	Four Bears (Segment)
49960	Mandaree (Segment)
61100	Patent Gate (Township of)
65780	Red Wing (Township of)

McLean County

02180	Amundsville (Township of)
02340	Andrews (Township of)
03820	Aurena (Township of)
05980	Benedict
06780	Big Bend
07500	Blackwater (Township of)
08060	Blue Hill (Township of)

FIPS ID	Name
11180	Butte
11220	Butte (Township of)
11420	Byersville (Township of)
14980	Coal Creek Junction
15140	Coleharbor
16700	Cremerville (Township of)
17500	Custer
18580	Deepwater (Township of)
19860	Dogden (Township of)
19980	Douglas (Township of)
21690	East McLean
24100	Emmet
25580	Falkirk
27334	Fort Berthold
27340	Fort Berthold Indian Reservation
29460	Garrison
29660	Gate (Township of)
32940	Greatstone (Township of)
38940	Horseshoe Valley (Township of)
44220	Lake Williams (Township of)
47820	Longfellow (Township of)
47940	Loquemont (Township of)
49860	Malcolm (Township of)
51380	Max
49180	McGinnis (Township of)
51820	Medicine Hill (Township of)
52340	Mercer
52380	Mercer (Township of)
52400	Merida
57720	North Central McLean
60260	Otis (Township of)
65460	Raub
66980	Riverdale
67020	Riverdale Junction
68220	Roseglen
68260	Roseglen (Township of)

FIPS ID	Name
68420	Rosemont (Township of)
69140	Ruso
73780	Snow (Township of)
74200	South McLean
70060	St. Mary (Township of)
79940	Turtle Lake
79980	Turtle Lake (Township of)
80660	Underwood
80670	Underwood
82060	Victoria (Township of)
83700	Washburn
85070	West McLean
85660	White Shield
86580	Wilton
86940	Wise (Township of)
21940	Economy (Township of)
60920	Parshall (Segment)
72235	Shell Creek (Segment)
85670	White Shield (Segment)
63660	Poplar (Township of)
73740	Snake Creek (Township of)
	Mercer County
06660	Beulah
21710	East Mercer
27336	Fort Berthold
27340	Fort Berthold Indian Reservation
30740	Glenharold
31180	Golden Valley
36780	Hazen
43235	Knife River Indian Villages National Historic Site
62260	Pick City
66140	Republic
75420	Stanton
79700	Truax

FIPS ID	Name
85075	West Mercer
88140	Zap
80310	Twin Buttes (Segment)
	Morton County
01700	Almont
08050	Bluegrass
09180	Breien
10820	Burgess
12080	Captain's Landing (Township of)
19050	Dengate
20780	Duke Spur
21340	Eagle Nest
21720	East Morton
24300	Engelter (Township of)
25600	Fallon
26660	Flasher
27685	Fort Rice
30860	Glen Ullin
35500	Harmon
36860	Hebron
39260	Huff
40060	Inverlac
41220	Judson
47280	Little Heart
48700	Lynwood
48780	Lyons
49900	Mandan
49920	Mandan
56700	New Salem
57700	North Almont
67400	Rock Haven
71200	Schmidt
73300	Sims
69740	St. Anthony
69700	St. Anthony (sta.)

FIPS ID	Name
77020	Sunny
77420	Sweet Briar
78910	Timmer
85080	West Morton
88000	Youngtown
17380	Curlew (Township of)
21380	Eagles Nest (Township of)

Mountrail County

01380	Alger (Township of)
03900	Austin (Township of)
04700	Banner (Township of)
05780	Belden
06700	Bicker (Township of)
07580	Blaisdell
09780	Brookbank (Township of)
10860	Burke (Township of)
14460	Clearwater (Township of)
16220	Cottonwood (Township of)
16300	Coulee
16540	Crane Creek (Township of)
16980	Crowfoot (Township of)
18460	Debing (Township of)
22500	Egan (Township of)
24560	Epworth
26060	Fertile (Township of)
27338	Fort Berthold
27340	Fort Berthold Indian Reservation
39180	Howie (Township of)
39740	Idaho (Township of)
40500	James Hill (Township of)
42620	Kickapoo (Township of)
43220	Knife River (Township of)
46340	Liberty (Township of)
48180	Lostwood
48220	Lostwood (Township of)

FIPS ID	Name
48340	Lowland (Township of)
48540	Lunds Valley
50140	Manitou
50180	Manitou (Township of)
48860	McAlmond (Township of)
49140	McGahan (Township of)
53700	Model (Township of)
54860	Mountrail (Township of)
55300	Myrtle (Township of)
56740	New Town
58820	Oakland (Township of)
59940	Osborn (Township of)
60060	Osloe (Township of)
60620	Palermo
60660	Palermo (Township of)
60940	Parshall
60980	Parshall (Township of)
62980	Plaza
63020	Plaza (Township of)
64100	Powers (Township of)
64180	Powers Lake (Township of)
64300	Prairie Junction
64900	Purcell (Township of)
65420	Rat Lake (Township of)
65740	Redmond (Township of)
68540	Ross
68580	Ross (Township of)
70620	Sanish
72220	Shell (Township of)
73020	Sidonia (Township of)
73060	Sikes (Township of)
73980	Sorkness (Township of)
74515	Southwest Mountrail
74860	Spring Coulee (Township of)
75380	Stanley
75740	Stave (Township of)

FIPS ID	Name
77860	Tagus
81420	Van Hook (Township of)
82500	Wabek
83760	Wassaic
84020	Wayzetta (Township of)
85085	West Mountrail
85540	White Earth
85580	White Earth (Township of)
06800	Big Bend (Township of)
06740	Big Ben (Township of)
60920	Parshall (Segment)
72235	Shell Creek (Segment)
85670	White Shield (Segment)
Nelson County	
00580	Adler (Township of)
02380	Aneta
06220	Bergen (Township of)
13260	Central (Township of)
14180	Clara (Township of)
17620	Dahlen
17660	Dahlen (Township of)
18300	Dayton (Township of)
19780	Dodds (Township of)
24500	Enterprise (Township of)
26220	Field (Township of)
27020	Forde (Township of)
34780	Hamlin (Township of)
39820	Illinois (Township of)
43180	Kloten
44300	Lakota
44340	Lakota (Township of)
45540	Lee (Township of)
46140	Leval (Township of)
50460	Mapes
49580	McVille

FIPS ID	Name
52140	Melvin (Township of)
52640	Michigan (Township of)
55460	Nash (Township of)
55860	Nesheim (Township of)
58460	Norval
59580	Ora (Township of)
59900	Osago (Township of)
61460	Pekin
61540	Pelto
61860	Petersburg
61900	Petersburg (Township of)
68820	Rubin (Township of)
68900	Rugh (Township of)
70700	Sardis
70820	Sarnia (Township of)
79180	Tolna
83340	Wamduska (Township of)
85820	Whitman
86140	Williams (Township of)
27780	Fort Totten Indian Reservation
74640	Spirit Lake Reservation
52700	Michigan City (Township of)
52740	Michigan City (corporate name for Michigan)
52660	Michigan (corporate name Michigan City)
19445	Devils Lake Sioux Indian Reservation
87430	Wood Lake (District)
Oliver County	
13180	Center
21730	East Oliver
27420	Fort Clark
35100	Hannover
37420	Hensler
60305	Otter Creek

FIPS ID	Name
64620	Price
70500	Sanger
85110	West Oliver
	Pembina County
00700	Advance (Township of)
00860	Akra
00900	Akra (Township of)
04100	Backoo
05260	Bathgate
05300	Bathgate (Township of)
05580	Beaulieu (Township of)
08660	Bowesmont
12180	Carlisle (Township of)
12940	Cavalier
12980	Cavalier (Township of)
15620	Concrete
15660	Concrete Junction
17060	Crystal
17100	Crystal (Township of)
20340	Drayton
20380	Drayton (Township of)
23900	Elora (Township of)
25980	Felson (Township of)
26720	Fleece
29100	Gardar
29140	Gardar (Township of)
30500	Glasston
34380	Hallson
34620	Hamilton
34660	Hamilton (Township of)
40980	Joliette
41020	Joliette (Township of)
44580	La Moure (Township of)
46100	Leroy
46300	Leyden

FIPS ID	Name
46660	Lincoln (Township of)
47460	Lodema (Township of)
48900	McArthur
52780	Midland (Township of)
54740	Mountain
55620	Neché
55660	Neché (Township of)
60820	Park (Township of)
61580	Pembina
61620	Pembina (Township of)
62860	Pittsburg
64980	Ragus
70020	St. Joseph (Township of)
70260	St. Thomas
70300	St. Thomas (Township of)
77360	Svold
78620	Thingvalla (Township of)
82980	Walhalla
83020	Walhalla (Township of)
37380	Hensel (corporate name Canton)
12060	Canton City (corporate name for Hensel)
	Pierce County
01220	Alexander (Township of)
02620	Antelope Lake (Township of)
03980	Aylmer
04580	Balta
04620	Balta (Township of)
05220	Barton
13300	Central Pierce
14820	Clifton
23300	Elling (Township of)
23940	Elverum (Township of)
34140	Hagel (Township of)
38740	Hong

FIPS ID	Name
40700	Jefferson (Township of)
46220	Leverich
52580	Meyer (Township of)
55900	Ness (Township of)
58080	North Pierce
59820	Orrin
66060	Reno Valley (Township of)
68860	Rugby
68980	Rush Lake (Township of)
71700	Selz
73100	Silva
74305	South Pierce
79220	Torgerson (Township of)
79780	Truman (Township of)
79900	Tunbridge
80100	Tuscarora (Township of)
85460	White (Township of)
87180	Wolford

Ramsey County

05100	Bartlett
05140	Bartlett (Township of)
09700	Brocket
12900	Cato (Township of)
13380	Chain Lakes (Township of)
14140	Churchs Ferry
16340	Coulee (Township of)
16580	Crary
16660	Creel (Township of)
18060	Darby
18740	De Groat (Township of)
19220	Derrick
19420	Devils Lake
19435	Devils Lake Municipal Airport
20260	Doyon
20620	Dry Lake (Township of)

FIPS ID	Name
22340	Edmore
24860	Essex
25660	Fancher (Township of)
27760	Fort Totten (sta.)
28580	Freshwater (Township of)
29500	Garske
32220	Grand Harbor
32260	Grand Harbor (Township of)
34820	Hammer (Township of)
34860	Hampden
35300	Harding (Township of)
38020	Highland Center (Township of)
41620	Keith
43100	Klingstrup (Township of)
44260	Lakewood Park
45300	Lawton
45340	Lawton (Township of)
46620	Lillehoff (Township of)
53260	Minnewaukan (Township of)
54420	Morris (Township of)
55980	Newbre (Township of)
56380	Newland (Township of)
56980	Nixon (Township of)
57260	Noonan (Township of)
57722	North Creel (Township of)
57780	Northfield (Township of)
59140	Odessa (Township of)
59460	Ontario (Township of)
60340	Overland (Township of)
61500	Pelican (Township of)
61660	Penn
63680	Poplar Grove (Township of)
64740	Prospect (Township of)
65180	Ramsey
67700	Rohrville
68780	Royal (Township of)

FIPS ID	Name
74280	South Minnewaukan (Township of)
74060	Southam
69940	St. Joe
75580	Starkweather
75980	Stevens (Township of)
76860	Sullivan (Township of)
77460	Sweetwater
79580	Triumph (Township of)
84140	Webster
84180	Webster (Township of)
27780	Fort Totten Indian Reservation
74640	Spirit Lake Reservation
73620	S Minnewaukan
19445	Devils Lake Sioux Indian Reservation
17000	Crow Hill (District)
27710	Fort Totten (District)
70150	St. Michael (District)

Ransom County

01460	Aliceton (Township of)
01540	Alleghany (Township of)
02460	Anselm
04420	Bale (Township of)
06820	Big Bend (Township of)
11300	Buttzville
12580	Casey (Township of)
15065	Coburn
15060	Coburn (Township of)
23340	Elliott
23380	Elliott (Township of)
24260	Enderlin
24380	Englevale
27580	Fort Ransom
27620	Fort Ransom (Township of)

FIPS ID	Name
33180	Greene (Township of)
35180	Hanson (Township of)
40300	Island Park (Township of)
40340	Isley (Township of)
46380	Liberty (Township of)
47100	Lisbon
49540	McLeod
54180	Moore (Township of)
57740	Northern Pacific Crossing
57900	Northland (Township of)
60460	Owego (Township of)
64500	Preston (Township of)
68380	Rosemeade (Township of)
70460	Sandoun (Township of)
71460	Scoville (Township of)
72180	Sheldon
72300	Shenford (Township of)
74940	Springer (Township of)
77540	Sydna (Township of)
79860	Tuller (Township of)
81680	Venlo

Renville County

09100	Brandon (Township of)
11620	Callahan (Township of)
14020	Chola
14260	Clay (Township of)
15380	Colquhoun (Township of)
22100	Eden Valley (Township of)
24460	Ensign (Township of)
25140	Fairbanks (Township of)
30580	Glenburn
32580	Grano
32780	Grassland (Township of)
33220	Greene
33740	Grover (Township of)

FIPS ID	Name
34580	Hamerly (Township of)
34700	Hamlet (Township of)
39620	Hurley (Township of)
40380	Ivanhoe (Township of)
47420	Lockwood (Township of)
48020	Loraine (Lorain)
49460	McKinney (Township of)
53780	Mohall
55180	Muskego (Township of)
57460	Norma
62900	Plain (Township of)
64460	Prescott (Township of)
64820	Prosperity (Township of)
67380	Rockford (Township of)
68020	Roosevelt (Township of)
72540	Sherwood
75180	Stafford (Township of)
79140	Tolley
81300	Van Buren (Township of)
85500	White Ash (Township of)
47980	Lorain (Loraine)

Richland County

00100	Abercrombie
00140	Abercrombie (Township of)
02540	Antelope (Township of)
04940	Barney
04980	Barney (Township of)
05065	Barrie
05060	Barrie (Township of)
05390	Bayne
05860	Belford (Township of)
07430	Blackmer
09020	Brandenburg (Township of)
09340	Brightwood (Township of)
13220	Center (Township of)

FIPS ID	Name
14100	Christine
15180	Colfax
15220	Colfax (Township of)
17980	Danton (Township of)
19380	Deville (Township of)
19540	Dexter (Township of)
20740	Duerr (Township of)
21220	Dwight
21260	Dwight (Township of)
21300	Eagle (Township of)
23620	Elma (Township of)
23720	Elmore
24400	Enloe
25300	Fairmount
25340	Fairmount (Township of)
25460	Fairview Junction
25820	Farmington
28500	Freeman (Township of)
28940	Galchutt
29060	Garborg (Township of)
32620	Grant (Township of)
32900	Great Bend
33140	Greendale (Township of)
34900	Hankinson
37140	Helendale (Township of)
38660	Homestead (Township of)
39700	Ibsen (Township of)
42540	Keystone
44460	La Mars
43995	Lake Traverse Sisseton Indian Reservation
44500	LaMars (Township of)
46420	Liberty Grove (Township of)
46460	Lidgerwood
47200	Lithia
50380	Mantador

FIPS ID	Name
51340	Mathews
54220	Mooreton
54260	Mooreton (Township of)
54340	Moran (Township of)
54580	Moselle
55340	Nansen (Township of)
60220	Oswald
62820	Pitcairn
64090	Power
72620	Sheyenne (Township of)
73880	Sonora
76090	Stiles
76940	Summit (Township of)
80500	Tyler
81580	Veblen Junction
82140	Viking (Township of)
82660	Wahpeton
82700	Wahpeton Junction
82780	Walcott
82820	Walcott (Township of)
82900	Waldo (Township of)
84700	West End (Township of)
87740	Wyndmere
87780	Wyndmere (Township of)
73460	Sisseton Indian Reservation (Also SD)
37080	Heipa (District)
Rolette County	
00780	Agate
05740	Belcourt
17420	Currie (Township of)
21020	Dunseith
21520	East Dunseith
21750	East Rolette
26900	Fonda

FIPS ID	Name
41900	Kelvin
43340	Kohlmeier (Township of)
51260	Maryville (Township of)
55220	Mylo
55380	Nanson
58125	North Rolette
67780	Rolette
67820	Rolla
70540	San Haven (San Haven State Hospital)
72250	Shell Valley
72260	Shell Valley (Township of)
74320	South Rolette
74340	South Valley (Township of)
69980	St. John
78740	Thorne
80010	Turtle Mountain
80020	Turtle Mountain Indian Reservation
70580	San Haven State Hospital
25380	Fairview (Township of)
46060	Leonard (Township of)
69260	Russell (Township of)
Sargent County	
08620	Bowen (Township of)
08940	Brampton
08980	Brampton (Township of)
13020	Cayuga
15100	Cogswell
16740	Crete
18820	De Lamere
19180	Denver (Township of)
20820	Dunbar (Township of)
27260	Forman
27300	Forman (Township of)

FIPS ID	Name
29780	Geneseo
34020	Gwinner
34300	Hall (Township of)
34785	Hamlin
34880	Hample
35420	Harlem (Township of)
36140	Havana
37500	Herman (Township of)
39020	Hoving
40460	Jackson (Township of)
42860	Kingston (Township of)
43995	Lake Traverse Sisseton Indian Reservation
50660	Marboe (Township of)
52940	Milnor
52980	Milnor (Township of)
56860	Nicholson
65340	Ransom (Township of)
69340	Rutland
69380	Rutland (Township of)
70740	Sargent (Township of)
72780	Shuman (Township of)
74460	Southwest (Township of)
76220	Stirum
76580	Straubville
78140	Taylor (Township of)
78500	Tewaukon (Township of)
81780	Verner (Township of)
82340	Vivian (Township of)
84100	Weber (Township of)
85740	Whitestone Hill (Township of)
86060	Willey (Township of)
73460	Sisseton Indian Reservation (Also SD)
37080	Heipa (District)

FIPS ID	Name
	Sheridan County
06340	Berlin (Township of)
08300	Boone (Township of)
13310	Central Sheridan
19060	Denhoff
19100	Denhoff (Township of)
22220	Edgemont (Township of)
25420	Fairview (Township of)
31500	Goodrich
31540	Goodrich (Township of)
37980	Highland (Township of)
38500	Holmes (Township of)
46700	Lincoln Dale (Township of)
46745	Lincoln Valley
51060	Martin
51100	Martin (Township of)
51350	Mauch (Township of)
49020	McClusky
49060	McClusky (Township of)
56260	New Germantown (Township of)
58130	North Sheridan
62180	Pickard (Township of)
62200	Pickardville
64715	Prophets (Township of)
68470	Rosenfield (Township of)
73540	Skogmo
74330	South Sheridan
76540	Strassburg (Township of)
	Sioux County
12020	Cannon Ball
13320	Chadwick
27860	Fort Yates
27870	Fort Yates
52300	Menz (Township of)
58135	North Sioux

FIPS ID	Name
63700	Porcupine
71660	Selfridge
73820	Solen
74520	Southwest Sioux
75300	Standing Rock Indian Reservation (Also SD)
12030	Cannonball (District)
27885	Fort Yates (District)
42000	Kenel (District)
63710	Porcupine (District)

Slope County

02060	Amidon
10220	Bucklin (Township of)
12420	Carroll (Township of)
12620	Cash (Township of)
13140	Cedar Creek (Township of)
13410	Chalky Butte
15740	Connor (Township of)
16620	Crawford (Township of)
19275	De Sart
18520	Deep Creek
20140	Dovre (Township of)
24760	E-Six
35620	Harper (Township of)
39300	Hughes (Township of)
39420	Hume (Township of)
50860	Marmarth
51635	Mazda
53100	Mineral Springs (Township of)
54140	Moord (Township of)
54700	Mound (Township of)
58275	Northwest Slope
61260	Peaceful Valley (Township of)
62510	Pierce
65060	Rainy Butte (Township of)

FIPS ID	Name
66620	Richland Center (Township of)
70420	Sand Creek (Township of)
72100	Sheets (Township of)
73580	Slope Center (Township of)
77100	Sunshine (Township of)
85125	West Slope
85620	White Lake (Township of)
87340	Woodberry (Township of)

Stark County

02580	Antelope
05820	Belfield
08860	Boyle
17610	Daglum
19620	Dickinson
19625	Dickinson North
19630	Dickinson South
21760	East Stark
22700	Eland
30460	Gladstone
45660	Lefor (St. Elizabeth)
45700	Lehigh
66500	Richardton
71140	Schefield
74185	South Heart
78180	Taylor
85130	West Stark
88200	Zenith
69860	St. Elizabeth

Steele County

05660	Beaver Creek (Township of)
07340	Blabon
09620	Broadlawn (Township of)
12220	Carpenter (Township of)
15300	Colgate

FIPS ID	Name
15340	Colgate (Township of)
21740	Easton (Township of)
22060	Edendale (Township of)
24340	Enger (Township of)
26420	Finley
26460	Finley (Township of)
26475	Finley Air Force Station
28140	Franklin (Township of)
31140	Golden Lake (Township of)
33420	Greenview (Township of)
38860	Hope
39340	Hugo (Township of)
48580	Luverne
52020	Melrose (Township of)
56060	Newburgh (Township of)
62380	Pickert
64660	Primrose (Township of)
67100	Riverside (Township of)
71940	Sharon
71980	Sharon (Township of)
72425	Sherbrooke
72420	Sherbrooke (Township of)
84940	Westfield (Township of)
86460	Willow Lake (Township of)

Stutsman County

01260	Alexander (Township of)
03500	Ashland (Township of)
07700	Bloom
07740	Bloom (Township of)
07780	Bloomenfield (Township of)
10060	Buchanan
10100	Buchanan (Township of)
13660	Chase Lake (Unorganized Territory)
13940	Chicago (Township of)

FIPS ID	Name
14580	Clements ville
14660	Cleveland
15700	Conklin (Township of)
16020	Corinne (Township of)
16140	Corwin (Township of)
16380	Courtenay
16420	Courtenay (Township of)
17460	Cusator (Township of)
18700	Deer Lake (Township of)
21140	Durham (Township of)
21180	Durupt
22380	Edmunds
22420	Edmunds (Township of)
22900	Eldridge
22940	Eldridge (Township of)
26740	Flint (Township of)
28700	Fried (Township of)
28725	Frontier Village
29860	Gerber (Township of)
29940	Germania (Township of)
30380	Glacier (Township of)
31380	Goldwin
32860	Gray (Township of)
33660	Griffin (Township of)
37820	Hidden (Township of)
38625	Homer
38620	Homer (Township of)
40100	Iosco (Township of)
40580	Jamestown
40592	Jamestown Municipal Airport
40780	Jim River Valley (Township of)
40815	Johnson
42180	Kensal
42220	Kensal (Township of)
43190	Kloze
45940	Lenton (Township of)

FIPS ID	Name
47060	Lippert (Township of)
48300	Lowery (Township of)
48740	Lyon (Township of)
50300	Manns (Township of)
51020	Marstonmoor (Township of)
51860	Medina
52820	Midway (Township of)
52900	Millarton
53980	Montpelier
54020	Montpelier (Township of)
54100	Moon Lake (Township of)
56100	Newbury (Township of)
57060	Nogosek (Township of)
58280	Northwest Stutsman
60780	Paris (Township of)
60860	Parkhurst
61940	Peterson (Township of)
62620	Pingree
62660	Pingree (Township of)
62740	Pipestem Valley (Township of)
62940	Plainview (Township of)
65950	Reeves
68100	Rose (Township of)
68740	Round Top (Township of)
71860	Severn (Township of)
71905	Sharlow
71900	Sharlow (Township of)
73340	Sinclair (Township of)
74660	Spiritwood
74700	Spiritwood (Township of)
74740	Spiritwood Lake
70180	St. Paul (Township of)
75260	Standard Spur
76180	Stirton (Township of)
76620	Streeter
76660	Streeter (Township of)

FIPS ID	Name
76780	Strong (Township of)
77625	Sydney
77620	Sydney (Township of)
81260	Valley Spring (Township of)
81540	Vashti
82540	Wadsworth (Township of)
83260	Walters (Township of)
84300	Weld (Township of)
86660	Windsor
86700	Windsor (Township of)
86740	Winfield (Township of)
87380	Woodbury (Township of)
87580	Woodworth
88020	Ypsilanti
88060	Ypsilanti (Township of)
75620	State Hospital
Towner County	
02150	Amourdale
03060	Armourdale
03100	Armourdale (Township of)
03140	Arndt
03660	Atkins (Township of)
04820	Barks Spur
06620	Bethel (Township of)
07180	Bisbee
11860	Cando
11900	Cando (Township of)
15780	Considine
15860	Coolin (Township of)
16780	Crocus
16820	Crocus (Township of)
18140	Dash (Township of)
22540	Egeland (BN name Olmstead)
23460	Ellsberry
30020	Gerrard (Township of)

FIPS ID	Name
31980	Grainfield (Township of)
35140	Hansboro
39100	Howell (Township of)
44980	Lansing (Township of)
51580	Maza
51620	Maza (Township of)
53900	Monroe (Township of)
54940	Mount View (Township of)
56140	New City (Township of)
56750	Newville
59340	Olmstead
59380	Olson (Township of)
61020	Pasha
61140	Paulson (Township of)
61780	Perth
62420	Picton (Township of)
67540	Rock Lake (Township of)
70780	Sarles
72980	Sidney (Township of)
73660	Smith (Township of)
73940	Sorenson (Township of)
74980	Springfield (Township of)
78260	Teddy (Township of)
80340	Twin Hill (Township of)
82020	Victor (Township of)
82300	Virginia (Township of)
88220	Zion (Township of)
67580	Rock Lake (corporate name Rocklake)
67500	Rocklake (corporate name for Rock Lake)
	Trail County
01820	Alton
05940	Belmont (Township of)
07060	Bingham (Township of)

FIPS ID	Name
07620	Blanchard
07660	Blanchard (Township of)
07820	Bloomfield (Township of)
08140	Bohnsack (Township of)
11340	Buxton
11380	Buxton (Township of)
11500	Caledonia
11540	Caledonia (Township of)
14740	Clifford
17340	Cummings
22820	Eldorado (Township of)
23740	Elm River (Township of)
24740	Ervin (Township of)
28980	Galesburg
29020	Galesburg (Township of)
29300	Garfield (Township of)
32300	Grandin
33300	Greenfield
33340	Greenfield (Township of)
36100	Hatton
37460	Herberg (Township of)
38100	Hillsboro
38140	Hillsboro (Township of)
41820	Kelso
41860	Kelso (Township of)
46860	Lindaas (Township of)
51500	Mayville
51540	Mayville (Township of)
54380	Morgan (Township of)
55170	Murray
57540	Norman (Township of)
58540	Norway (Township of)
63900	Portland
63940	Portland Junction
64540	Preston
65660	Redco

FIPS ID	Name
66260	Reynolds
68505	Roseville
68500	Roseville (Township of)
75700	Stavanger (Township of)
77820	Taft
82180	Viking (Township of)
87100	Wold (Township of)

Walsh County

00260	Acton (Township of)
00340	Adams
00380	Adams (Township of)
02860	Ardoch
02900	Ardoch (Township of)
03740	Auburn
12660	Cashel
14700	Cleveland (Township of)
15820	Conway
19460	Dewey (Township of)
20900	Dundee (Township of)
22020	Eden (Township of)
22260	Edinburg
25180	Fairdale
25860	Farmington (Township of)
26100	Fertile (Township of)
27060	Fordville
27100	Forest River
27140	Forest River (Township of)
30940	Glenwood (Township of)
31060	Golden (Township of)
31820	Grafton
31860	Grafton (Township of)
35740	Harriston (Township of)
37540	Herrick
37580	Herriot
38780	Hoople

FIPS ID	Name
41700	Kellogg
42260	Kensington (Township of)
42460	Kerry
42900	Kinloss (Township of)
44620	Lampton (Township of)
44860	Lankin
45260	Latona (Township of)
49990	Mandt
51140	Martin (Township of)
51780	Medford (Township of)
53540	Minto
55500	Nash
58380	Norton (Township of)
58940	Oakwood
58980	Oakwood (Township of)
59500	Ops
59540	Ops (Township of)
60900	Park River
61820	Perth (Township of)
62780	Pisek
63255	Pleasant Valley
63460	Poland
64270	Prairie Centre (Township of)
64860	Pulaski (Township of)
68940	Rushford (Township of)
70940	Sauter (Township of)
72380	Shepherd (Township of)
73220	Silvesta (Township of)
69620	St. Andrews (Township of)
78820	Tiber (Township of)
81860	Vernon (Township of)
81940	Veseleyville
81980	Vesta (Township of)
82460	Voss
83180	Walsh Centre (Township of)
83220	Walshville (Township of)

FIPS ID	Name
83540	Warsaw
64260	Prairie Center (Township of)
	Ward County
00740	Afton (Township of)
02420	Anna (Township of)
03780	Aurelia
04145	Baden
04140	Baden (Township of)
06460	Berthold
06500	Berthold (Township of)
07260	Bison Spur
09380	Brillian (Township of)
10940	Burlington
10980	Burlington (Township of)
11100	Burt (Township of)
11740	Cameron (Township of)
12100	Carbondale (Township of)
12260	Carpio
12300	Carpio (Township of)
17700	Dakota Boys Ranch
19140	Denmark (Township of)
19300	Des Lacs
19340	Des Lacs (Township of)
19900	Donnybrook
20020	Douglas
20290	Drady
23660	Elmdale (Township of)
24980	Eureka (Township of)
25060	Evergreen (Township of)
27340	Fort Berthold Indian Reservation
27980	Foxholm
28020	Foxholm (Township of)
28460	Freedom (Township of)
29620	Gasman (Township of)
32980	Greely (Township of)

FIPS ID	Name
33100	Greenbush (Township of)
35700	Harrison (Township of)
35820	Hartland
37600	Hesnault
37860	Hiddenwood (Township of)
38260	Hilton (Township of)
40140	Iota Flat (Township of)
40660	J. D. Switch
41980	Kenaston
42020	Kenmare
42060	Kenmare (Township of)
43020	Kirkelie (Township of)
47020	Linton (Township of)
47540	Logan
47740	Lone Tree
48500	Lund (Township of)
49820	Makoti
49940	Mandan (Township of)
50700	Margaret (Township of)
51220	Maryland (Township of)
51460	Mayland (Township of)
49420	McKinley (Township of)
53380	Minot
53420	Minot Air Force Base
53480	Minot International Airport
55700	Nedrose (Township of)
56580	New Prairie (Township of)
56500	Newman (Township of)
56940	Niobe
59740	Orlien (Township of)
61060	Passport (Township of)
65160	Ralston
65820	Ree (Township of)
66420	Rice Lake (Township of)
67860	Rolling Green (Township of)
69060	Rushville (Township of)

FIPS ID	Name
69300	Ruthville
69460	Ryder
69500	Ryder (Township of)
70860	Sauk Prairie (Township of)
70980	Sawyer
71020	Sawyer (Township of)
72075	Shealy (Township of)
74310	South Prairie
74580	Spencer (Township of)
75060	Spring Lake (Township of)
70100	St. Marys (Township of)
76980	Sundre (Township of)
77180	Surrey
77220	Surrey (Township of)
77500	Swenson
78060	Tatman
78100	Tatman (Township of)
79100	Tolgen (Township of)
79260	Torning (Township of)
81380	Vang (Township of)
83780	Waterford (Township of)
86180	Willis (Township of)
87220	Wolseth
53460	Minot Base
72060	Shealey (Township of)
60920	Parshall (Segment)
85670	White Shield (Segment)
Wells County	
06380	Berlin (Township of)
06980	Bilodeau (Township of)
08580	Bowdon
09220	Bremen
09260	Bremen (Township of)
10700	Bull Moose (Township of)
12820	Cathay

FIPS ID	Name
12860	Cathay (Township of)
13700	Chaseley
13740	Chaseley (Township of)
17140	Crystal Lake (Township of)
18860	Delger (Township of)
20100	Dover
24220	Emrick
25500	Fairville (Township of)
26180	Fessenden
27900	Forward (Township of)
28060	Fram (Township of)
29980	Germantown (Township of)
34100	Haaland (Township of)
34460	Hamberg
34540	Hamburg (Township of)
35900	Harvey
36380	Hawksnest (Township of)
36820	Heaton
37020	Heimdal
37060	Heimdal (Township of)
38220	Hillsdale (Township of)
39580	Hurdsfield
40820	Johnson (Township of)
48660	Lynn (Township of)
50020	Manfred
50060	Manfred (Township of)
58580	Norway Lake (Township of)
60020	Oshkosh (Township of)
63620	Pony Gulch (Township of)
64700	Progress (Township of)
69100	Rusland (Township of)
73140	Silver Lake (Township of)
74540	Speedwell (Township of)
69660	St. Anna (Township of)
77660	Sykeston
77700	Sykeston (Township of)

FIPS ID	Name
81060	Valhalla (Township of)
84380	Wells (Township of)
84420	Wellsburg
85100	West Norway (Township of)
85120	West Ontario (Township of)
84740	Western (Township of)
87540	Woodward (Township of)
74080	South Cottonwood (Township of)
71420	S. Cottonwood (Township of)
87260	W. Ontario (Township of)

Williams County

00940	Alamo
02740	Appam
03620	Athens (Township of)
03930	Avoca
05020	Barr Butte (Township of)
06860	Big Meadow (Township of)
06900	Big Stone (Township of)
07460	Blacktail (Township of)
08100	Blue Ridge (Township of)
08220	Bonetrail
08260	Bonetrail (Township of)
09820	Brooklyn (Township of)
10540	Buford (Township of)
10620	Bull Butte (Township of)
13460	Champion (Township of)
14860	Climax (Township of)
16060	Corinth
16440	Cow Creek
20580	Dry Fork (Township of)
20660	Dublin (Township of)
21660	East Fork (Township of)
23420	Ellisville (Township of)
24540	Epping
24580	Equality (Township of)

FIPS ID	Name
25900	Farmvale (Township of)
27380	Fort Buford (Buford)
27835	Fort Union Trading Post Nat. Hist. Site (Also MT)
30470	Gladys
31260	Golden Valley (Township of)
31460	Good Luck (Township of)
33500	Grenora
33540	Grenora (Township of)
34740	Hamlet
34940	Hanks
35340	Hardscrabble (Township of)
36620	Hazel (Township of)
36900	Hebron (Township of)
38340	Hofflund (Township of)
41260	Judson (Township of)
43910	Lake Jessie
46900	Lindahl (Township of)
50820	Marley
50870	Marmon
50980	Marshall (Township of)
49220	McGregor
53660	Missouri Ridge (Township of)
53940	Mont (Township of)
55920	Nesson Valley
56300	New Home (Township of)
59260	Oliver (Township of)
59860	Orthell (Township of)
62140	Pherrin (Township of)
63260	Pleasant Valley (Township of)
65020	Rainbow (Township of)
65580	Ray
67460	Rock Island (Township of)
68700	Round Prairie (Township of)
70900	Sauk Valley (Township of)
71300	Scorio (Township of)

FIPS ID	Name
74260	South Meadow (Township of)
74115	Southeast Williams
74780	Springbrook
74820	Springbrook (Township of)
76340	Stony Creek (Township of)
76460	Strandahl (Township of)
78380	Temple
78940	Tioga
78980	Tioga (Township of)
79020	Todd
79460	Trenton
79500	Trenton (Township of)
79740	Truax (Township of)
80220	Twelve Mile (Township of)

Out of State

99080	Canada
99027	Minnesota
99030	Montana
99046	South Dakota
99999	Not listed

FIPS ID	Name
80620	Tyrone (Township of)
82100	View (Township of)
84580	West Bank (Township of)
84640	West Bonetraill
85300	Wheelock
85340	Wheelock
86020	Wildrose
86220	Williston
86260	Williston (Township of)
86860	Winner (Township of)
88100	Zahl
16460	Cow Creek (Township of)
10580	Buford
73180	Silver Strip

Appendix D

Medication List

01	Acetaminophin	32	Heparin
02	Acetaminophin Supp	33	Hydralazine (Apresoline)
03	Activated Charcoal	34	Hydrocortisone
04	Adenosine	35	Inapsine (Droperidol)
05	Albuterol	36	Insulin (Humulin, Novolin)
06	Aminophylline	37	Ipratropium (Atrovent)
07	Amiodarone (Cordarone)	38	Isoproterenol
08	Amyl Nitrate	39	IV Solution - other
09	ASA	40	Ketamine
10	Atropine	41	Labetalol
11	Calcium	42	Lactated Ringers
12	Cardizem	43	Lidocaine
13	Cyanide Antidote	44	Lidocaine pre-mix bag
14	D50	45	Lorazepam (Ativan)
15	D5W IV Solution	46	Lovenox
16	Dexamethasone (Decadron)	47	Magnesium Sulfate
17	Diazepam (Valium)	48	Mannitol (Osmitol)
18	Digoxin (Lanoxin)	49	Meperidine (demerol)
19	Diltiazem (Cardizem)	50	Meteproterenol (Alupent)
20	Diphenhydramine (Benedryl)	51	Metoprolol (Lopressor)
21	Dobutamine	52	Midazolam (Versed)
22	Dopamine	53	Morphine
23	Epinephrine	54	Nalbuphine (Nubain)
24	Epinephrine 1:10,000	55	Naloxone (narcan)
25	Epinephrine 1:1000	56	Nifedipine (Procardia)
26	Etomidate	57	Nitroglycerin Infusion
27	Fentanyl (Sublimaze)	58	Nitroglycerin Paste
28	Flumazanil	59	Nitroglycerin Spray
29	Furosemide (Lasix)	60	Nitroglycerine Tabs
30	Glucagon	61	Nitroprusside (Nipride)
31	Haloperidol (Haldol)	62	Nitrous Oxide (Nitronox)

63	Norepinephrine (Levophed)	80	Retavase
64	Normal Saline IV Solution	81	Rocuronium (Zemuron)
65	Oral Glucose	82	Sodium Bicarbonate
66	Other	83	Sodium Pentothol
67	Oxygen	84	Solu-Medro (Methylprednisone Succinate)
68	Oxytocin (pitocin)	85	Streptokinase (Streptase)
69	Pancuronium (Pavulon)	86	Succinylcholine (Anectine)
70	Phenyllophrine (Neo-Synephrine)	87	Tenecteplase (TNKase)
71	Phenytoin (Dilantin)	88	Terbutaline
72	Procainamide	89	Thiamine
73	Prochlorperazine (Compazine)	90	Tissue Plasminogen Activator TPA)
74	Promethazine HCL (Phenergran)	91	Total Parenteral Nutrition (TPN)
75	Proparacaine (Alcaine)	92	Vasopressin (Pitressin)
76	Proparacaine (Alcaine)	93	Vecuronium (Norcuron)
77	Propranolol (Inderal)	94	Verapamil
78	Racemic Epinephrine		
79	Rapacuronium (Rapion)		

Note: This list is currently listed and numbered alphabetically. This order may change with the addition or deletion of medications. Numbers will stay assigned as listed with new numbers issued for future additions.

Appendix E

Flat ASCII File Format

Element Name	Field Type	Length	Start Position	End Position
Lithocode	Numeric*	8	1	8
Agency / Unit Number	Numeric*	8	9	16
Primary Role of Unit	Numeric*	2	17	18
Incident Number	Alpha/Numeric*	7	19	25
Date Incident Reported	Date*	8	26	33
PCR Report Date	Date*	8	34	41
Estimated Date of Injury/Onset Symptoms	Date	8	42	49
Estimated Time of Injury/Onset Symptoms	Numeric	4	50	53
Incident GPS Location	Alpha/Numeric	20	54	73
Incident City / County FIPS	Numeric*	5	74	78
Dispatch Type	Numeric*	2	79	80
Incident Type (Service Type)	Numeric*	2	81	82
Injury Present	Numeric*	2	83	84
Location Type	Numeric*	2	85	86
Incident / Patient Disposition	Numeric*	2	87	88
Primary Crewmember Cert Type	Numeric*	2	89	90
Primary Crewmember Cert Number	Numeric	9	91	99
Crewmember Two Cert Type	Numeric	2	100	101
Crewmember Two Cert Number	Numeric	9	102	110
Crewmember Three Cert Type	Numeric	2	111	112
Crewmember Three Cert Number	Numeric	9	113	121
Crewmember Four Cert Type	Numeric	2	122	123
Crewmember Four Cert Number	Numeric	9	124	132
PSAP Time of Call	Numeric	4	133	136
Dispatched (Time Unit Notified)	Numeric*	4	137	140
Enroute (Time Unit Responded)	Numeric	4	141	144
Arrive Scene (Time arrived at Scene)	Numeric	4	145	148
Arrive Patient (Time of arrived at Patient)	Numeric	4	149	152
Depart Scene (Time Unit left Scene)	Numeric	4	153	156
Arrive Destination (Time at Facility/Dest.)	Numeric	4	157	160
Available (Time back in service)	Numeric*	4	161	164
Patient's First Name	Alpha/Numeric	15	165	179
Patient's Last Name	Alpha/Numeric	15	180	194
Patient's Street Address	Alpha/Numeric	30	195	224
City of Residence	Alpha/Numeric	30	225	254
State of Residence	Alpha/Numeric	2	255	256
Zip Code of Residence	Numeric	5	257	261
Social Security Number	Numeric	9	262	270
Date of Birth	Date	8	271	278
Age	Numeric	4	279	282
Gender	Numeric	2	283	284

Element Name	Field Type	Length	Start Position	End Position
Race / Ethnicity	Numeric	2	285	286
Vehicle Type	Numeric*	2	287	288
Response Mode (To Scene)	Numeric	2	289	290
Transport Mode (From Scene)	Numeric	2	291	292
Cause of Injury	Numeric	10	293	302
Pertinent Pre-Existing Conditions	Numeric	10	303	312
Complaint Reported by Dispatch	Numeric*	2	313	314
Signs and Symptoms Present	Numeric	10	315	324
Provider Impression	Numeric	2	325	326
Scene Factors Affecting EMS Delivery	Numeric	10	327	336
Injury Description	Numeric	10	337	346
Safety Devices	Numeric	10	347	356
Motor Vehicle Impact	Numeric	6	357	362
Witnessed Cardiac Arrest	Numeric	2	363	364
Time of Cardiac Arrest	Numeric	4	365	368
Provider of First CPR	Numeric	2	369	370
Time of First CPR	Numeric	4	371	374
Provider of First Defib	Numeric	2	375	376
Time of First Defib	Numeric	4	377	380
Number of Defib shocks	Numeric	2	381	382
Time CPR Discontinued	Numeric	4	383	386
Time of Spontaneous Circulation Returned	Numeric	4	387	390
Injury Indicators	Numeric	6	391	396
Position in Vehicle	Numeric	2	397	398
Alcohol /Drug Use	Numeric	2	399	400
Initial Vital Signs Time	Numeric	4	401	404
Initial Pulse Rate	Numeric	3	405	407
Initial Respiratory Rate	Numeric	3	408	410
Initial Systolic Blood Pressure	Numeric	3	411	413
Initial Diastolic Blood Pressure	Numeric	3	414	416
Initial Blood Pressure Method	Numeric	1	417	417
Initial Skin Perfusion	Numeric	2	418	419
Initial GCS - Eye Opening Component	Numeric	2	420	421
Initial GCS - Verbal Component	Numeric	2	422	423
Initial GCS - Motor Component	Numeric	2	424	425
Initial Revised Trauma Score	Numeric	2	426	427
Initial Cardiac Rhythm Time	Numeric	4	428	431
Initial Cardiac Rhythm	Numeric	2	432	433
Final Cardiac Rhythm Time	Numeric	4	434	437
Final Cardiac Rhythm (At Destination)	Numeric	2	438	439
Procedure or Treatment Name	Numeric	60	440	499
Level of Care Provided (Nature of Incident)	Numeric*	2	500	501
Medication Name	Numeric	56	502	557
Destination Type	Numeric	2	558	559
Destination Determination	Numeric	2	560	561
Prior Aid	Numeric	6	562	567

Element Name	Field Type	Length	Start Position	End Position
Receiving Agency	Numeric	4	568	571
Research 1	Numeric	4	572	575
Research 2	Numeric	4	576	579
Dataset Version	Numeric	2	580	581

Items marked with a * are mandatory for all records submitted.

The field type denotes the expected format for that field. If the field is not used then spaces should be submitted in place of the field type.